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H. G. Barrows, M. D.

BOSTON.

To H. G. [illegible] M.D. LL.D.

Boston

Mass

[illegible]

Very truly,
Wm W. Hartley

Dup. 7731.2

TRANSACTIONS

OF THE

ECLECTIC MEDICAL SOCIETY

OF THE

STATE OF NEW YORK,

For the year 1867.

TRANSMITTED TO THE LEGISLATURE JANUARY 17, 1868.

ALBANY:
VAN BENTHUYSEN & SONS' STEAM PRINTING HOUSE.
1868.

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State of New York.

No. 25.

IN ASSEMBLY,

January 17, 1868.

TRANSACTIONS
OF THE ECLECTIC MEDICAL SOCIETY OF THE STATE OF NEW YORK.

Hon. William Hitchman,

Speaker of the Assembly:

Sir—I have the honor herewith to transmit to you the Transactions of the Eclectic Medical Society of the State of New York for the year 1867.

Very respectfully,

Your obedient servant,

PAUL W. ALLEN,

Recording Secretary.

New York, 111 East 82d St.

ECLECTIC MEDICAL SOCIETY OF THE STATE OF NEW YORK,
ALBANY, *Jan.* 16, 1868.

The Papers constituting the following Transactions have received our approval.

WM. W. HADLEY,
PAUL W. ALLEN,
D. E. SMITH,
Committee of Publication.

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TRANSACTIONS.

ARTICLE I.

Proceedings of the Fifth Annual Meeting.

The fifth annual meeting of this Society was held at Saratoga Springs, on Wednesday, the 12th of June, 1867, President Robert S. Newton, M. D., in the chair.

The meeting was opened by prayer by the Rev. Dr. Shanks.

The minutes of the last meeting were read by the Secretary, Wm. W. Hadley, M. D., and were approved.

The annual report of the Treasurer was received and placed on file. It showed a balance in the treasury of $61.14.

The Secretary made his annual report which was accepted.

The Board of Directors reported through its Secretary, Dr. Wm. W. Hadley, that this Association had, in accordance with the requirements of the charter, reported annually their proceedings to the Legislature of this State, and at the same time praying that body to print its proceedings as it had those of other medical societies in the State. This petition had not been granted until the last meeting of the General Assembly, at which time the report was ordered to be published, and a thousand additional copies for the benefit of the Society. This work is now rapidly passing through the press, and will be ready for distribution in a few weeks, which will be attended to by the Board of Directors.

Drs. Wm. Jones, L. Stanton, and A. W. Russell, were appointed a Committee on Credentials, and instructed to make a report to the Board of Censors. The following candidates were reported by the Board of Censors for permanent membership, who on ballot were unanimously elected: Geo. L. Whitford, M. D., Fredonia; J. A. Rega, M. D., Belleville; W. R. Hayden, M. D, Paul W. Allen, M. D, Charles T. Hart, M. D., Prince A. Morrow, M. D., and J. Milton Sanders, M. D., New York city.

The rule regulating the admission of members was, by a unanimous vote, suspended, and a special report of the Board of Censors recommending for membership James N. Betts, M. D., G. W. King, M. D., James Y. Tuthill, M. D., and O. Ford, M. D., was adopted, and the candidates on ballot were unanimously elected.

James Pennoyer, M. D., of Brooklyn, sent in his resignation as a member of this Society, and the same was accepted.

The Society then resolved itself into a Committee of the Whole, upon the condition of Eclecticism at large. Prof. J. M. Scudder, of Cincinnati, and Dr. J. M. Comings, of Massachusetts, were then introduced to the meeting as delegates from their State Societies. Prof. Scudder gave a brief statement of the condition of the cause in the West, and presented the following papers as the sentiment of the State Medical Society of Ohio, concurring with the action taken by the Eclectic Medical Society of the State of New York at its last two annual meetings, in regard to the formation of a National Eclectic Medical Association, and a National Eclectic Pharmacopœia.

"*Resolved*, That it is the opinion of this Association that the time has now come for the organization of a National Eclectic Medical Society, and to this end they would co-operate with all State, District, and County Eclectics Medical Societies.

"*Resolved*, That we now proceed to elect two delegates to the National Society.

"*Whereas*, The pharmaceutical preparations of our school, as made by various manufacturers, are frequently very different in character and medicinal properties, while bearing the same names, consequent upon the use by pharmaceutists of private formulas, in preference to those set forth in King's American Dispensatory, and

"*Whereas*, Such uncertainty is detrimental to the reputation and success of our physicians, therefore

"*Resolved*, That this Association, recognizing the necessity of a revision of our Pharmacopœia, do appoint a committee of three, to act with like committees from State Societies and Medical Colleges throughout the United States, in making such revision."

This Association would also suggest that the literary part of the work be intrusted to Prof. John King, the author of the American Dispensatory."

Prof. Scudder also presented the following resolutions and memorial:

"*Resolved*, That in this country all legally educated physicians should of right be equal before the law, and we claim for all lawful graduates equal rights in the service of the Government.

"*Resolved*, That, to obtain these rights, we petition the Congress of the United States, and that we solicit the co-operation of all legally educated physicians."

To the Senate and House of Representatives of the United States in Congress assembled:

"Your petitioners, representing a large body of physicians in the United States, would set forth, that heretofore the examinations by the army and navy medical boards have been strictly confined to one class of medical men, and have been persistently refused to all others.

"It has been ascertained that about fifteen thousand legally educated physicians are excluded by this unjust rule. In education and intelligence they are fully the equals of their competitors. We cannot but regard the exclusion of so large a number of citizens from the public service as contrary to the spirit of our institutions, unjust to this large body of physicians, and a detriment to the public service.

"We therefore pray for the passage of an act placing the graduates of all chartered medical colleges in the United States on the same basis, and admitting all to competitive examination before the army and navy examining boards."

These resolutions were discussed at some length by Professors Scudder, Allen, Hadley, Newton, Dr. Fenner, and others; whereupon the committee arose and reported progress.

Report of Committees:

The Committee on Theory and Practice, Drs. D. E. Smith and L. Stanton, made an able report, which was referred to the Committee on Publication. The Report on Chemistry, Pharmacy, New Preparations, by Drs. J. Milton Sanders and Edwin Freeman, was received and ordered to be printed. The Report on Materia Medica, by Drs. W. W. Hadley, A. W. Russell, and E. Freeman, was also referred to the Committee on Publication. The Report of the Committee on Surgery, Drs. R. S. Newton and E. Freeman, was read and referred to the Committee on Publication. Drs. H. E. Firth, E. Freeman, and H. Pease were appointed a committee to nominate officers for the ensuing year.

Voted, That the Society now adjourn, to partake of the Annual Dinner, until half past two o'clock.

The Society now repaired to the spacious Dining Hall of Dr. Hamilton, by whose hospitality they were entertained. After doing ample justice to the bounties before them, President Newton, called the members to order, to attend to an intellectual feast of sentiments and speeches.

Sentiments were responded to by Drs. Hamilton, Russell, Tuthill, Freeman, Newton, Allen, Dr. Comins, of Massachusetts; Prof. Scudder, of the Ohio Eclectic Medical College; and Prof. Hollembaek, of the Pennsylvania Eclectic Medical College, and others.

Afternoon Session.

At half-past two o'clock, the Society re-assembled in the large parlor of Dr. Hamilton's mansion.

The Committee on Nominations reported the names of the following gentlemen as officers for the ensuing year:

President, Wm. W. Hadley, M. D., New York; Vice-President, L. Stanton, M. D., Copenhagen; Recording Secretary, Paul W. Allen, M. D., New York; Corresponding Secretary, M. M. Fenner, M. D., Jamestown; Treasurer, D. E. Smith, M. D., Brooklyn; Board of Censors, Drs. D. E. Smith, A. W. Russell, E. Freeman, W. Jones, R. S. Newton and C. S. Totman; and these gentlemen were severally elected to the offices to which they were nominated.

Prof. Newton, the retiring President, gave a valedictory address, in which he referred to the obstacles which had heretofore obstructed the establishment of the Eclectic practice, the present state of the cause in numerous States, the vast improvements in practice introduced by Eclectics, the necessity of educating physicians to fill our places, our duty to thoroughly educate young men to the profession, and other kindred topics.

Prof. Hadley, the newly elected President, now addressed the Society. He expressed his gratitude for the honor conferred upon him; referred to the long period of twenty-five years during which they had jointly labored in the cause of progressive medicine; to the responsibility and honor of the work of the physician, and to the great labor before us with the people, the Legislature, and with Congress.

Dr. H. E. Firth now read an essay on "Contributions of Eclectic Physicians and Surgeons to Science."

Dr. C. Gazlay read an essay on "The History of Medicine, Ancient and Modern."

A paper was also presented by O. E. Newton, M. D., of Cincinnati, an honorary member of this Society, on "Asiatic Cholera, as witnessed and treated by him in 1849, 1850 and 1856, and also in 1866."

The papers by Drs. Firth, Gazlay and Newton were referred to the Committee on Publication, and the thanks of the Society were voted for the same; and also to Professors Newton and Hadley for their appropriate and eloquent addresses.

The annual oration was delivered by Prof. Edwin Freeman, M. D.

A vote of thanks was tendered to Prof. Freeman for his able and elaborate address, which was referred to the Committee on Publication.

Dr. Freeman announced the death of one of the members, Dr. H. M. Sweet, and Drs. Tuthill, Stanton and Totman were appointed a committee to draft resolutions expressive of the feelings of the Society in regard to his death.

Voted, That an appropriation of one hundred dollars be made from the funds of the Society, to the Recording Secretary, in payment for his services in preparing the next Annual Transactions for publication.

Dr. Hamilton offered the following resolution, which was discussed at some length by Drs. Hamilton, Stanton, Russell, Newton, Smith, and others, after which it was unanimously adopted by the Association:

Resolved, That we are as much as ever convinced of the great and demoralizing evil of intemperance, and that we will use all laudable means to discourage the use of all alcoholic liquors as a beverage, and that we will not use it in our prescriptions unless imperatively demanded.

Dr. A. W. Russell offered the following:

Resolved, That physicians of this Society be requested to furnish statistics of the results of the Eclectic treatment in all epidemic forms of disease, at the annual meeting of the Society, to be printed with the minutes of the Society.

Dr. R. S. Newton offered the following:

Resolved, That a special committee of three be appointed to correspond with the committees appointed by other State Eclectic Medical Societies, in reference to the organization of a National

Eclectic Medical Association, to be held as soon as the various committees can agree upon the time and place for holding the same.

Drs. R. S. Newton, W. W. Hadley and Paul W. Allen were appointed such committee.

Dr. R. S. Newton offered the following:

Resolved, That a committee of three be appointed by this Society, and one from each auxiliary district society, and three from the Eclectic Medical Society of New York city, for the purpose of co-operating with similar committees appointed by other State Eclectic medical societies and colleges, in preparing a National Eclectic Pharmacopœia, and that this committee correspond with Prof. John King, of Cincinnati, Ohio, in regard to a systematic organization of the committee, and to confer and carry out the work by correspondence, and report at the next annual meeting.

Drs. P. W. Allen, C. Totman and M. M. Fenner, were appointed a committee by the Society.

Professors R. S. Newton, J. M. Sanders and W. W. Hadley were appointed a committee by the Faculty of the Eclectic Medical College of the city of New York.

Dr. R. S. Newton offered the following:

Resolved, That this Society appoint six delegates, with alternates, and that each auxiliary district society appoint one, and the Eclectic Medical College of New York appoint two, delegates to attend a National Eclectic Medical Association, to be held at ——, 186–, and that these delegates correspond with the special committee appointed by this Society in regard to the adoption of measures to be carried out by the delegates for the organization of a National Eclectic Medical Association.

Drs. William W. Hadley, L. Stanton, William Jones, Samuel Tuthill, D. E. Smith and James N. Betts, were appointed delegates by the Society. Profs. R. S. Newton and E. Freeman were appointed delegates from the Eclectic Medical college of New York.

On motion, it was unanimously resolved that this Society return their sincere thanks to Dr. R. Hamilton for the generous entertainment tendered to the Society.

Prof. L. E. Jones, M. D., and John King, M. D., of Cincinnati, Ohio; J. M. Comins, M. D., and John Stow, M. D., of Massachu-

setts; Horatio G. Newton, M. D., of Maine, and J. W. Johnson, M. D., of Connecticut, were elected honorary members.

Appointments for next annual meeting:

Annual Address—Paul. W. Allen, M. D.

Essayists—D. E. Smith, M. D., H. Pease, M. D.

Surgery—R. S. Newton, M. D., James N. Betts, M. D.

Obstetrics—A. W. Russell, M. D., H. E. Firth, M. D.

Materia Medica—H. C. Gazlay, M. D., A. P. Parsons, M. D.

Theory and Practice—A. B. Wescott, M. D., C. S. Totman, M. D.

Chemistry and Pharmacy.—Prof. J. Milton Sanders, A. B. Whitney.

Eclectic Medical Literature—Prof. C. T. Hart, M. M. Fenner, M. D.

Voted, unanimously, That the by-law regulating the time and place of the annual meeting of the Society be suspended, so as to admit of a change of time for holding the annual meeting.

Voted, That our next meeting be held at Albany, on the third Wednesday and Thursday of January, 1868.

Voted, To adjourn.

PAUL W. ALLEN, *Recording Secretary.*

ARTICLE II.

PROCEEDINGS OF THE SIXTH ANNUAL MEETING.

The New York State Eclectic Medical Society held its sixth annual meeting on the 15th and 16th of January, 1868, at the Delavan House, Albany.

At ten o'clock, A. M., 15th inst., the meeting was called to order by the President, Prof. Wm. W. Hadley, of New York.

Prayer was then offered by Rev. C. W. D. Bridgeman, of Albany,

The minutes of last meeting were read and approved.

On motion of Dr. Harman Pease, it was.

Resolved, That the last Wednesday in January, instead of the second Wednesday in June, be the day of the annual meeting of the society, and that article five of the by-laws be amended so that the present meeting shall be the sixth annual meeting.

The roll of members was then read by the Secretary.

Drs. A. W. Russell, J. A. Martin and Harman Pease, were appointed a committee on credentials of delegates from district and other societies.

On motion of Professor R. S. Newton, a resolution was adopted, inviting His Excellency, Gov. Fenton, the members of the Legislature and Constitutional Convention to be present at the meeting of the society in the Assembly chamber.

The Board of Censors having reported favorably, the following named persons were elected to membership, viz:

From the Eclectic Medical Society of the city of New York, comprising the IV, V, VI, VII and VIII Senatorial Districts:

E. F. Garvin, M. D.	E. V. Wright, M. D.
Henry C. Cooper, M. D.	Frederic Myers, M. D.
J. M. Comins, M. D.	E. H. Millington, M. D.
James Day, M. D.	O. S. Gregory, M. D.
P. A. Morrow, M. D.	M. B. Hayden, M. D.

Brooklyn Academy of Eclectic Medicine, comprising the II and III Senatorial District:

John Horton, M. D.	Wm. Brown Warner, M. D.

Eclectic Medical Society, XXXII Senatorial District:

J. A. Salisbury, M. D.	Alvah Jennings, M. D.

Tioga County Eclectic Medical Society, XXIV Senatorial District:

J. Frank M. D.

Eclectic Medical Society, XXIII Senatorial District:

J. J. Westcott, M. D. A. S. Douglass, M. D.
O. L. Southworth, M. D. B. H. Aylworth, M. D.

Eclectic Medical Society, XVIII Senatorial District:

A. P. Hale, M. D. C. E. Heaton, M. D.

Eclectic Medical Society, Oswego county, XXI Senatorial District:

C. D. Snell, M. D. F. B. Chapman, M. D.
H. L. Baker, M. D. W. L. Jewell, M. D.

The Secretary, Paul W. Allen, submitted his annual report. There was:

Received for membership in the Society	$45 00
Received for certificates of membership	25 00
	$70 00
Paid for printing, stationery, &c.	5 83
Leaving balance in the treasury	$64 17

A resolution was adopted, on motion of Prof. Allen, that the portrait of the President of the Society be placed in the next volume of the Society's Transactions.

Prof. Paul W. Allen then offered the following, which was carried:

Resolved, That we acknowledge with gratitude the services of the friends of liberal medicine in the Legislature of this State for the year 1867; and that our thanks are especially due to the Hon. John O'Donnell, Hon. Henry R. Low, and the Hon. Walter L. Sessions, of the Senate; and to the Hon. Speaker, Edmund L. Pitts, Hon. Mark D. Wilbur, Hon. Benjamin F. Bruce, and others of the Assembly; and to Dr. Alexander Wilder, President of the Board of Trustees of the Eclectic Medical College of New York, for their efficient efforts in securing to us equal recognition and rights with other schools of medicine.

On motion of Prof. R. S. Newton, it was

Resolved, That the resolution to amend the constitution as reported in the proceedings of the Eclectic Medical Society of the State of New York, on the 13th and 14th of June, 1866,

recommending that the words "have been" shall be so changed as to read "be," and that in the place of the word "and" the word "having" should be inserted, be adopted.

Hon. John O'Donnell appeared in the meeting and was introduced by the Vice-President, Dr. L. Stanton. He responded, expressing his cordial sympathy with the objects of the Society.

The Society took a recess of one hour for dinner.

Afternoon Session.

At two o'clock P. M., the Society re-assembled.

Dr. Harman Pease read an essay, which was referred for publication.

Prof. R. S. Newton stated his views on the nature and treatment of Cancer, in which he differs from the opinions held by the so-called regular school. He takes the ground that Cancer is, primarily, a local disease, though it may affect the constitution subsequently, under certain circumstances. Another view of its pathology which has been held, regards it as primarily a constitutional disease; the local development being considered merely the evidence that it exists in the system. He reasons differently.

Inasmuch as the blood and tissues take up the secretions of this cancerous organization they may become involved in the disease.

The blood becoming diseased in this way may develop cancer in different parts of the system. Dr. N. said: These views were announced by me several years ago. Recently, Dr. Carmichael, of Edinburgh, has laid down the principle that Cancer consists of a cell, monad, animalcule or cyst, and in no instance have these cells been found in the circulation before ulceration had occurred. Where ulceration and absorption had taken place, he was able to detect it by microscopical examination.

Virschow recently published a work on cell formations, in which he takes the ground that in the whole range of his microscopical examination, including indiscriminately all classes of patients, he never found a single case of cancer cell, or any evidence of cancer in the system, except under the circumstances given, where ulceration and absorption had occurred.

These are the conclusions I arrived at many years ago, and as far back as 1846, I published a paper upon this subject. Although these opinions were not much noticed at that time, I have lived to see my entire paper embodied in this European work. There

are different classes of cancer. The majority of cancerous growths, without reference to classification, can be cured by appropriate local applications. I rely entirely on the use of the preparations of zinc and iron, and have cured hundreds of cases by these remedies. There is one form of the disease however, which cannot be successfully treated in this way. This form of the disease is known as Encephaloid or Fungus Hematodes or Rose cancer. As a general rule, a patient having this disease will not live more than eighteen months, but where it is very minute and develops itself slowly, it may go on to three and even four years. Encephaloid has its own peculiar organization. It holds the same relation to the human system that the mistletoe holds to the oak. It lives and grows, and becomes strong just in proportion as the system becomes weak and feeble. There is no parallel in the organization or similarity of structure between the mistletoe and the oak upon which it grows. It is the same in the relation of this form of cancer to the human body. Although the patient may bleed to death with Encephaloid or Rose or Bloody Cancer, yet nothing can be injected back through the tumor into the system.

It has its own nerves, blood vessels, and absorbents—its own peculiar anatomical organization. Dr. Newton now exhibited illustrations of a case of fungus hematodes which had been under his treatment since 1853, and which he regarded as one of the most remarkable cases in the whole range of surgery. At the time he took charge of the case, it presented itself in the form of a small tumor. A little hard spot appeared on the shoulder and has continued to increase ever since. Hemorrhage came on two years ago and has increased in frequency since. A few days ago it amounted to two quarts, and the disease now embraces the arm below the shoulder. The engraving exhibits the present appearance of the parts. It measures 29 inches round; the whole shoulder, arm and left half of the chest being covered by this huge cancerous growth. The sternum is pressed backward, the spine is curved, and the shoulder and elbow joints are disarticulated. Until recently the patient has been active and playful, but lately he complains of pain in the ankle, knee and stomach, and is only playful when the hemorrhage occurs.

Dr. Newton exhibited several other drawings of cases he had under treatment, and demonstrated his proposition that cancer is a curable disease, in certain circumstances. Because it is not cured

in all cases, is no reason why it should be considered an incurable disease, any more than typhoid and other forms of fever, in which we are unable to save all our patients.

Dr. Newton announced his purpose to present a systematic paper on this subject.

Dr. D. E. Smith read an essay on Dioscorea Villosa, which was referred. On motion of Prof. Newton, the Society then went into committee of the whole on the state of Eclecticism, Dr. J. Y. Tuthill in the chair.

Dr. R. W. Geddes gave an interesting account of the progress of Eclecticism in New England, for which he received the thanks of the Society.

Dr. Lyman Stanton, of Copenhagen, spoke of the reformed practice in the eighteenth senatorial district.

Dr. J. G. Fross, of Syracuse, delivered an address in favor of sending students to the Eclectic Medical College of the city of New York.

Dr. A. Wilder, President of the Board of Trustees, addressed the Society in behalf of the Eclectic Medical College of New York, and urged the importance of a higher standard of scientific attainment among practitioners.

Dr. D. E. Smith, of Brooklyn, stated that during a discussion in the Brooklyn Academy of Medicine, on the subject of croup, about two months ago, many new things were brought up, and among them a solution of chlorinated soda was recommended as an application for dissolving the membrane. At the time, he felt very skeptical of its value, but he had since had a very severe case of membranous croup which had resisted all the remedies he usually applied. The swelling was so great that a rye straw could not be passed in. As a last resort, he applied the above remedy, externally and internally, and in twenty minutes the patient was relieved. The case was promptly and effectually cured, as if by magic.

The remedy was introduced by Dr. James M. Comins, to the notice of the Academy.

In applying he used externally the full strength. Internally he employed one part of chlorinated soda to seven parts of water, sweetened, and applied with a swab, so as to bring it in direct contact with the membrane.

The relief to the child was instantaneous.

Dr. Comins said: I have used this remedy in some forty cases

of croup, and have not lost a single case. I employ the liquid chloride of soda externally, clear. It is a very powerful agent and will soon vesicate. Internally I use it sometimes a little stronger than Dr. Smith stated. It is antiseptic and removes any inflammatory action. In many cases, where I have been called, in consultation, it was thought impossible for the patient to live, but the application of this remedy brought relief in every case.

Its use is not confined to diphtheria, but it also applies in croup. I have never seen the remedy recommended in print, and so far as I know, it has never been employed outside the sphere of my labors. In milder forms of the disease it will not be required of the full strength given. It is strongly alkaline and seems to have a specific effect on diseases about the glands of the throat. Where a false membrane is formed, it may be used every twenty minutes or half hour, until destroyed. For older children, or adults, it can be used as a gargle; in younger patients it is necessary to apply it with a swab—at the same time it should be applied externally. I have only used it in high states of inflammation. When it is swallowed no bad results have occurred. If a large quantity were swallowed it might probably be antidoted by acids.

Prof. Allen said he regarded such facts as these of great value where they have stood the test of observation in a number of cases and by different persons. He had found great success in cases of croup by the use of the acetous syrup of sanguinaria.

His manner of employing it is to take a drachm of powdered bloodroot to half a pint of boiling water; let it stand for a moment, then strain it off clear and add an equal quantity of pure cider vinegar. Of that mixture of vinegar and strained infusion of bloodroot put a certain portion in a teacup, and sweeten it with sugar, making a syrup. Keep giving this to the patient once in every five or ten minutes to dissolve the membrane. This is almost a specific in cases of membranous croup. Sanguinaria seems to exert a specific influence upon that condition of the throat which develops the membrane. He had been successful within the last few years in cases where he would formerly have failed. Dr. A. said: This is not original with me, but was obtained from Dr. Jones' work. It has been tested by myself and others, and has been very successful. I suppose the acetic acid may have something to do with dissolving the membrane, but have not fully investigated the subject. I regard the false membrane in croup as the product

of inflammation. I should depend upon that remedy to dissolve the membrane, but would also employ arterial sedatives. I have given the tincture of veratrum viride in connection with it, in order to act on the condition which produces the disease.

As we cannot always tell whether croup is spasmodic, or dependent on the formation of a false membrane, I give broken doses of lobelia in all cases, in order to take care of the spasmodic condition.

By this means I meet all the indications—keep the system absorbing the acid mixture all the time, and saturating the system so as to reach and destroy that membrane—acting both through the circulation as well as by absorption from the pharynx into the larynx. The child is thirsty and feverish, desires some drink, and will take this readily. The veratrum is given once an hour, or once in two hours, both to overcome the general fever and the local inflammation. By this means I have been much more successful than I could formerly have hoped to be.

Prof. Hart remarked that many remedies were in use that were not seen in print, although frequently valuable. He regarded creosote, as nearly as any remedy can be so, a specific in dysentery. He gave it usually in prescription, ten drops of creosote to one ounce of water. Of this, one or two teaspoonfuls every three hours, will cure almost any case. Has seen the most rapid and beneficial results from its use, and never knew it to fail in cases where he employed it. In connection with its use, starch injections containing a little morphine may be given. Has given it in highly inflammatory cases, where there was considerable fever and regular dysenteric discharges from the bowels.

In croup, he used nitrate of silver, and found it a very powerful remedy. A homœpathic physican told him he generally prescribed, and afterward made his diagnosis. His course of treatment in croup was similar. If it was spasmodic, it would readily yield to anti-spasmodics. His first treatment was to give emetics and use foot-baths. After emesis had occurred, and the system was relaxed, he was in the habit of applying the nitrate of silver, in strong solution—sixty grains to one ounce; putting it as far down the trachea as possible, and using it repeatedly every fifteen or twenty minutes, for two or three applications. Found it the only thing he could rely upon in the treatment of pseudo-membraneous croup.

Dr. M. M. Fenner spoke of his success in the treatment of Illinois itch. Never found a case that would not yield readily to

the saturated solution of carbolic acid. Water takes up about one part in forty. He has cured cases by three applications, that had been treated for from six months to seven years.

Dr. J. Y. Tuthill had used it in cases of children. After bathing over the surface with warm water and soap suds, apply it very lightly and let it strike in. One or two applications will cure it entirely without using any other medicine. This disease occurs in otherwise healthy infants, and has found this specific in every case.

Meeting adjourned till evening.

The evening session was held in the Assembly chamber.

Hon. E. L. Pitts had been invited to preside. Dr. Paul W. Allen, Professor of Theory and Practice of Medicine in the Eclectic Medical College of the city of New York, delivered the annual address upon the subject of "Eclectic Medicine: the Lessons of its Past, and the Duties of its Future."

Among the distinguished personages present were His Excellency, Gov. Fenton, Hon. A. F. Allen, of Jamestown, and other members of the Constitutional Convention, members of the Senate and Assembly, and others.

Voted, that the thanks of this Society be presented Prof. Paul W. Allen, for his very instructive and eloquent address.

The Society adjourned to meet at the Delavan House, to-morrow morning at 9 o'clock.

Second Day.

On Thursday Jan. 16th, the Society met pursuant to adjournment at 9 o'clock, A. M., the President, Prof. Wm. W. Hadley, of New York, in the chair.

Dr. D. E. Smith, of Brooklyn, moved that the proceedings, papers and address of this meeting, be included in the transactions of the Society for 1867; and that 1,000 copies of the annual address delivered by Prof. Allen be published in pamphlet form, for the use of the Society. Carried.

Dr. M. M. Fenner, of Jamestown, made a report on Eclectic Medical Literature, showing that 150 volumes have been published.

Prof. R. S. Newton exhibited the first volume of the American Eclectic Medical Register for 1868. Prof. N. gave a synopsis of its contents, and stated that it would be issued annually, and would prove of great value to the profession.

He then addressed the Society at some length on the duty of the profession to support the medical journals and other publications, not only by their pecuniary aid, but by literary contributions. He stated that the American Eclectic Review was circulating extensively in Europe, and should be in the hands of every American physician.

Dr. J. Y. Tuthill spoke upon the same topic, corroborating the statement of Prof. Newton.

Dr. H. C. Cooper read a valuable paper entitled "Educts versus Products," from Dr. James Day, of New York, showing that the best mode of administering medicines was in the form of alcoholic extract, which, if properly obtained, contained the medicinal virtue of the plant as it existed in nature, freed from lignine and inert matter, while the concentrated powders were in a state of oxidation, which prevented their easy assimilation by the stomach, and induced irritation.

Prof. C. T. Hart addressed the meeting upon the subject of Dr. Day's paper, and stated that podophyllin, as obtained in the shops, possessed irritant qualities which were not observable in the alcoholic extract.

He remarked upon the necessity of improving the preparations of concentrated eclectic medicines, so as to make them uniform in strength.

The report of the Treasurer, Dr. D. E. Smith, was read.

Balance on hand		$61 14
1867, June 4, amount received		70 00
1868, Jan, 15, amount received		60 00
		$191 14
1868, Jan. 15, paid Secretary	$100 00	
Stationery and printing	5 83	
Cartage and express, Transactions	13 50	
		119 33
Balance		$71 81

On motion, the report was accepted.

Prof. Edwin Freeman, of New York, presented an interesting report of an operation performed by him, in which the entire upper jaw and cheek bones were removed, in consequence of cancerous infiltration, after the case had been abandoned by some of the most prominent surgeons of New York. The details of the

operation were stated in full, and the result of the case had been entirely successful.

Dr. A. W. Russell, of Albany, reported an extraordinary case of ovarian tumor, which had closely simulated pregnancy in its early stages. Over fourteen gallons of fluid, weighing 113 lbs., were drawn off, and the entire tumor was found to weigh 150 lbs.

Several of the members made speeches, urging the necessity of uniting in the support of our medical colleges and publications, and expressing their condemnation of the practices of certain institutions in Philadelphia, in selling diplomas to persons who had not pursued a regular course of study. The college of Dr. Paine had no claim to the support of eclectic practitioners, as it had long ceased to uphold the doctrines of Eclecticism.

Dr. A. W. Russell offered the following resolutions, which were adopted:

Resolved, That, whereas, the Eclectic Medical Society of the State of New York, having inaugurated the movement for establishing an Eclectic Medical college in the city of New York; and

Whereas, This Society still feel that there is great and urgent necessity for pushing on the progress of medical reform in this State and in the United States, and of resisting medical intolerance everywhere; and

Whereas, This Society has seen with pride the result of their efforts in the establishing of an Eclectic Medical college in the city of New York under the charter granted for that purpose; therefore, be it

Resolved, That this Society will, individually, and as a whole, use its best efforts in sustaining such college, so long as it does not depart from the true principles on which it was established—of Eclecticism in medicine, and so long as it guarantees, by an able faculty, a full and thorough course of medical instruction.

Resolved, That we recommend to the Faculty and Board of Trustees of said college that they issue certificates of scholarship, which, for the sum of one hundred and fifty dollars ($150.00) each shall be a guarantee to the holder thereof of the privilege of attending lectures in said college until graduation, such certificate not to be transferable after the first attendance.

Also the establishment of permanent scholarships, (or scholarships for a limited period at a proportionate rate), at a sum which may be agreed upon by the board of trustees of said institution, for the building up and sustaining said institution, thus giving it a

permanent character; which scholarships shall be a guarantee to the holder thereof of the privilege of sending one student constantly to said college.

Professor Newton offered resolutions as follows:

Resolved, That the committee on the National Eclectic Medical Association and the National Pharmacopœia be continued and requested to act and report at the next regular meeting of this Society.

Resolved, That C. T. Hart, M. D., of the New York Chemical Laboratory, and W. B. Hayden, M. D., of the New York Pharmaceutic Company, be appointed on the committee on the Pharmacopœia.

Resolved, That our committee on the National Medical Association have full power to confer and concur with other delegates as to the time and place for the meeting of the same.

Resolved, That the present officers of this Society be continued until the next annual meeting.

Resolved, That it is the duty of the Governor of this State in making his appointments of members of the Metropolitan Board of Health, to select at least one member from Eclectic Physicians, as this would be doing an act of equal justice to the profession, and gratify the wish of more than one-half of all the citizens of the city and State of New York.

Unanimously adopted.

Dr. M. M. Fenner, of Jamestown, presented the following preamble and resolutions:

Whereas, Illicit and demoralizing advertisements of medicines and nostrums abound in the public journals of the day, tending to deceive the public and degrade the practice of medicine, and

Whereas, Uneducated medical pretenders are numerous in every part of the country, boasting of their ability to effect cures, and thus disappointing the hopes of their patrons and swindling the public; therefore

Resolved, That the Eclectic Medical Society of the State of New York insist upon elevating the standard of medical attainments, and the discouraging of empiricism in whatever guise it may appear.

Resolved, That the publication of demoralizing advertisements in the public journals should be discountenanced by every honorable practitioner.

Resolved, That the honorable, the Legislature of the State of New York be respectfully recommended to take effective measures,

during the present session, for discouraging and preventing the publication of immoral advertisements, as of other immoral literature.

The resolutions were unanimously adopted.

Dr. R. Hamilton, of Saratoga Springs, offered the following, which was also adopted unanimously:

Resolved, That the Eclectic Medical Society of the State of New York protest most emphatically against the practice of certain so called medical colleges of this country of conferring the degree of Doctor of Medicine upon persons who have neither attended full courses of lectures nor otherwise acquired a suitable knowledge of medical science; and that we utterly condemn the wicked bartering of medical diplomas to persons not properly qualified to practice medicine and surgery, and that this society will refuse to acknowledge the validity of such diplomas.

Dr. L. Stanton reported a case of Malignant Erysipelas of the Scrotum.

Prof. Allen presented a report from Dr. Southworth, on the use of Tincture of Spongia in Croup.

Dr. Southworth has used Spongia in over fifty cases, and regards it as one of the most valuable remedies that can be employed in this disease. He gives Mother Tincture of Spongia, gtt. x. in fifteen teaspoonfuls of water. Dose for a child two years old, one teaspoonful every fifteen or twenty minutes, for three or four doses; then once in two or three hours. He also makes external applications to the throat, and if there is much fever, gives small doses of Tincture of Lobelia.

Dr. Garvin stated that he had used the article satisfactorily, in about a dozen cases, and regarded it as almost a specific.

Dr. Fross said he had also used it successfully.

Dr. Geddes stated that he had an efficient treatment for many cases of Strangulated Hernia. He had had quite a number of cases, and so far it had never failed in his hand. He uses equal parts of Lobelia seeds and Tobacco, mixed with sweet oil: first adding boiling water to the Lobelia and Tobacco to render them more soluble. By this mean he had succeeded in several cases that could not be reduced by the usual manipulations.

Dr. Pease used pulverized bloodroot, blown into the throat through a quill, to remove the membrane in diphtheria. He has cured in this way very severe cases, and seldom has to repeat the

process more than two or three times, before the membrane comes away.

Dr. Garvin spoke of the value of Myricine in this disease, or in any severe inflammation of the throat.

Take ten grains myricine, put it in a teacup; pour it half full of boiling water, sweeten, it and give a few drops, so as to let it run down the throat. He looks upon it as specific in diphthertic, tonsillitic, or other inflammations of the throat.

The myricine may given every two or three minutes and kept running down the throat, so as to prevent any chance for the formation of false membrane.

The bayberry bark is also excellent when used in the form of infusion.

The President announced the appointments for the ensuing year, as follows:

Annual Address—Dr. M. M. Fenner, Jamestown.

Essayists—Drs. J. M. Comins and T. L. Harris.

Surgery—Drs. E. Freeman and Henry C. Cooper.

Obstetrics—Drs. W. Jones and Harman Pease.

Medical Hygiene—Drs. J. G. Fross and J. C. Hulburt.

Materia Medica—Drs. A. B. Westcott and E. S. Preston.

Theory and Practice—Drs. L. Stanton and P. W. Allen.

Chemistry and Pharmacy—Drs. C. T. Hart and H. C. Taylor.

The Status and Position of Eclectic Medicine—Drs. Josiah A. Martin and Samuel Tuthill.

Medical Statistics and Ethics—Drs. R. S. Newton and B. J. Stow.

Committee of Arrangements for Annual Meeting:

Drs. A. W. Russell, R. S. Newton and J. A. Martin.

Delegates to other State Medical Societies:

Massachusetts—Drs. W. R. Hayden, H. S. Firth.

Vermont—Drs. R. S. Newton, S. B. Hoag.

Maine—Drs. James Y. Tuthill, C. T. Hart.

Ohio—Drs. G. H. Preston, J. J. Westcott.

Connecticut—Drs. R. Hamilton, E. F. Garvin.

Canada—Drs. James Fenner, A. Stoddard.

Indiana—Drs. J. A. Salisbury, H. C. Gazlay.

Illinois—Drs. G. E. Lawrence, Wm. H. Hawley.

On motion, it was resolved to hold a semi-annual meeting at Syracuse, on the 24th and 25th June, 1868.

Drs. C. S. Totman and J. G. Fross, of Syracuse, were appointed by the Chair a Committee of Arrangements for such meeting. Dr. J. G. Fross was appointed to deliver the address.

The Society then adjourned.

PAUL W. ALLEN,
Recording Secretary.

ARTICLE III.

Annual Address, before the Eclectic Medical Society of the State of New York, at its Fifth Annual Meeting, June 12, 1867. By EDWIN FREEMAN, M. D., Professor of Anatomy in the Eclectic Medical College of the city of New York.

Mr. President and Gentlemen of the Eclectic Medical Society of the State of New York.—This is an age pre-eminently distinguished by the rapid advances made towards universal personal freedom. The last vestige of slavery has vanished from our beloved land, whose fair escutcheon should never have been tarnished by its presence, but not without a desperate struggle for its maintenance, for the purpose of saving the power it gave with it. Freedom is our motto, and it is worthy of a place prominently in the foreground, where we hope to see it ever engraved. So in our first conflict, when this nation first tried its strength, freedom against the attempted oppression of old world despotism, to crush it, after prodigies of valor and a heroic struggle, a part of which was upon this very spot on which we tread, came out the victor, for it was sustained by worthy hands and courageous and well-tried hearts. We, eclectic physicians, graduates of respectable medical colleges, are contending for that freedom, for personal independence, against the oppression of an arbitrary body, self-constituted, who would take away our manliness, as they have given up their own, and would crush us into the earth for daring to be independent. But aside from this motive, viz: to take means to protect ourselves in this God-given right, what is the potent cause that has influenced us to bring us together in this annual convocation? What power is there, stronger than self-interest, that can influence us to set aside the urgent calls of business, and the coining of the "Almighty dollar," to come up here to consult together? It is the cry of suffering humanity, to which the true physician's ear is always open, and his heart ready to respond. It is the wail of the hopelessly invalid, whose body is racked with pain, and seamed with cicatrices of sores, produced by drugs administered on the plea of their necessity, in breaking up disease. It is the prayer of the *vis medicatrix naturæ* to *us*, to see to it that it has fair play, in the great struggle with the elements of disease, as against the almost universal practice of

exhausting its energies and crippling its power. I think that it is unnecessary for me to rehearse to you, gentlemen, intelligent members of the reform branch of the medical profession, what I mean, for your eyes have seen and your ears have heard of the enormous outrages perpetrated on the people in the past, and to-day, by those who claim a lineal descent from Æsculapius. How the vital flame, kindled for the production and perpetuation of the human frame, has been quenched, or so enfeebled as to be unable to perform its work, by withdrawing from it the pabulum by which it was sustained, or by introducing agents that so deteriorated its qualities, that it ceased to perform the work allotted to it!

Life!! What is it? What is animal life in the human body, and what are the provisions made to sustain it in its integrity, are very pertinent questions, and questions which should be considered dispassionately; and the inquiry made as to whether the means used to save it from the destruction caused by disease are in harmony with those nature has provided for its continuance. Says Carpenter: "The idea of life is that of *vital activity*, and obviously, therefore, involves that of change. We do not consider any being as alive, which is not undergoing some continual alteration, however slow and obscure, that may be rendered perceptible to the senses. This alteration may be evidenced by the growth and extension of the organic structure, or by molecular changes in its substance, which do not produce any ostensible increase; or it may be most obviously manifested in movements, such as cannot be attributed to any physical cause." This explanation will apply to the most complex, as well as the most simple forms of vegetable and animal organizations, for the complex are but the aggregations of simple organizations, and the *complete life* of *each* is dependent upon the perfection of the vital action of each individual part. The simplest form of an organism is a cell in which the organic or vital force is in full operation. But *its* existence depends upon the pre-existence of an organic plastic matter, from which it is created. All vegetable organisms, no matter how complex or beautiful, are built up through the instrumentality of these two—the cell and the plasma. The same is true of animal organisms; and the nerve structures which are specially engrafted upon them, for purposes of sensation and motion, are produced according to the same general laws, that produce the other structures of bone and muscle. In the one the sap is the nutrient vital fluid, which affords the material for growth and reproduction; in the other the *circulating*

blood is the stream whence the supply is drawn, with which the formative cells build up the tissues and repair the waste. The secretory cells furnish lachrymal, salivary, buccal, mucous, gastric, biliary, pancreatic, enteric and other secretions. These are but forms of action of that vital force, which in its completeness in the human being is the *life of man.* How wonderful, yet how subtle and intangible it is! We cannot see it, nor is it made known to our other senses except in its operations; yet it is everywhere, all pervading and powerful. The power of that force then, or the strength of the life, its volume and endurance, is as the highest development of it in the cell. The delicate moss that covers with a cushion of green some shady bank, is easily crushed by the weight of the foot. The sturdy oak braves the howling tempest, which may beat upon its towering head for a century of years. The growth of the structure is the same, but the endurance is as the endurance of the constituent cell. The *macula germinativa* of the *human ovum* is but the $\frac{1}{640}$ of a line in diameter; yet from that minute particle, the life principle, by a process of reduplication and differentation of cells, erects a beautiful and symmetrical structure, replete with intricate processes, for sustaining itself, for comprehending the world around it, and for carrying on the workings of a spirit, in itself akin to the Infinite. These processes are all harmonious, and in their perfection sustain the life. There is a beautiful circle of operations which completes the whole, and we cannot say which is first, for each is necessary. If the lungs cease their work, life ceases to exist; or if the heart stops, the effect is the same; or if the stomach cease to supply nutriment, the bowels to defecate, the glands to depurate the blood, the effect is all the same,—the living principle no longer has power to antagonise the natural chemical forces, and soon succumbs, the structure returning to its original inorganic elements. Nor must we lose sight of the effect that the nerve structure has upon those processes. If the controlling influence of the brain be taken from the body, the same result hastens on. In the living, acting being, the processes of building up and tearing down are constantly going on, and the blood is the stream, whence all the supplies for every part are drawn, and into which all the waste is cast. It is a vital stream, kept so by contact with the tissues everywhere, in its turn imparting new life to them, and in it material is being constantly changed to form the higher organizations in the body.

Each constituent is necessary to it, and each in its proportion.

The fibrine is as necessary as the albumen, and the albumen as necessary as the corpuscles, and these as necessary as the water, the iron or the potash salts. A diminution of either produces disease; thus dropsy arises from a diminution of albumen as in Bright's disease; chlorosis from a diminution of red corpuscles, &c. The *waste* matter must also be immediately withdrawn, or disease results. The skin, lungs, liver, kidneys, &c., are the evacuants of the waste material; and when, perchance, a chilling draft constringes the cutaneous surface, the blood, forced from that surface, retains those substances which were passing there to be excreted, and these, becoming in excess, unless promptly thrown out by some other organ in the round of the circulation, irritate those parts most susceptible to their influence, paralyzing capillary action, and inducing a *stasis* of blood and that capillary congestion which precedes inflamation. A rallying of the forces of the part, and of the whole system, perhaps, then takes place, through the nervous system, (the *army telegraph* in the *vital conflicts*,) and if the *stasis* be not removed, an inflammation or general fever is the result. This irritant may be the product of other causes than colds, as the *materies morbi* of scrofula, or of any of the exanthemata, or of rheumatism, &c, when the effect is general; or of injury of a part, in which case the resulting effect is local. Inflammation or fever consists of the phenomena attending the best efforts nature can put forth, under the circumstances, to remove an obstruction to its normal action, (the obstruction being as I have just indicated), and those phenomena are indications of such effort. The degree of the inflammation or fever is an index of the volume of the vital force, providing that the irritant or injury is not so depressing in its effect on the nervous system as effectually or partially to suspend its action. If, then, fever and inflammation are the rallying efforts of the system, or a part, to sustain its vital integrity and remove obstruction, is it naturally the true policy to cripple its energies by weakening the vital force? Do we assist nature by draining off the only nutrient and vital fluid, or by destroying the plasticity and vitality of that fluid, and drugging the system with such agents as cannot be again eliminated from it, but in a tenfold degree repeat the mischief that it is the province of the physician to help remove? Is it not scientific and rational treatment to assist the overburdened and inactive organs in their efforts to draw off the offending, irritating substances through the natural channels of excretion? Should we not modify the exalted nervous

action, if there be such; and equalize the circulation by withdrawing it to other parts, from that most oppressed, keeping the precious fluid where nature intended it to be, and where it is most needed—in the body. Thus, by preventing an increase of the trouble, we lead to a diminution of it.

How are we as Eclectics succeeding in our great work of reform? Are calomel and the lancet still wielding their deadly sceptre over the land?

Boards of health are established by our legislators to suppress the ravages of the cholera pestilence, and yet we think a board should be established to root out a *curse* that comes in the form of a blessing; that is like the worm that dieth not, that knaws at man's vitality and eats up his substance, and that as surely destroys as the cholera, although more slowly. Those whose missions it is to heal, are taught from the colleges and from their books, that those deadly agents are the balm for every wound, and they would fain apply it everywhere. Where all are of the same mind, there is no accountability, and the most heinous evils are covered up. Where our physicians go, and the mal-practice of the others is made evident, and the comparative results of treatment, the allopaths have to study their interest and modify their practice. Eclectic physicians are doing a great work in the land, wherever they have gone. A light as of a better day follows in their path. Remarkable success in practice is their universal report. Candor and truthfulness are on their banner. They skulk not around under false colors, but making sure that their means of cure are sufficient, they trust to potent doses to speedily relieve their patients and restore them to health. The people recognize the great merit in their practice, and are being rapidly converted to its use, and the cry comes from all quarters for more help in the great work of medical reform. Have we the schools in which to properly educate men for the work, or shall they go to allopathic schools, where they will imbibe the very errors that we seek to combat, and leave us alone in the work, and leave the work to die out with us. But it was recommended by the Allopathic State Society, that it be a rule in the colleges not to admit to matriculation, students of irregular practitioners. If they *would go* there, they will be excluded. There are various flourishing eclectic colleges in different parts of the country, but there has been one started in the great metropolitan city of New York, organized under a special charter from the Legislature of your State, which

calls for and demands your earnest, hearty and unselfish coöperation, and your most untiring energies in its support, to make it a great success. It is, indeed, metropolitan, and should command students from the north, south, east and west. Its faculty is able and earnest, and true to the cause, in the interest of which it was organized. Colleges multiply the amount of good that can be accomplished for a cause, by sending out its students, who become so many missionaries, established in so many stations, spreading the light of beneficent truth far and near, and making many converts and volunteers, who, in their turn, accomplish a similar work in another place, and thus the good cause is advanced. Colleges create the material by which they themselves are to be supported, but like the graduates they send out to struggle in the world, they need not only the good wishes, but *all the kindly helpings* of all the friends *at first;* afterwards, they are self supporting. We need to use the most determined and vigorous efforts, for those who have been notoriously the most determined foes to reform, are unceasing in their efforts to crush us, and keep themselves before the people, as the only legal and regular profession. In this day of such general enlightenment of the people, such an effort may seem to some preposterous; but, unless we are vigilant, we will find that *sometime* they will succeed.

In Ohio, the Allopathic physicians have been trying to have a law passed, which would require all who wish to practice medicine, to submit to be examined by a Board composed wholly of those of their own confession of faith, which would, of course, exclude from practice all but themselves. The effort was defeated by a vote of 17 ayes (all being physicians,) to 58 nays. It shows, however, the aim of the party, and to what extremes they will go to accomplish their purpose. All the suggestions made for the elevation of the profession by that body known as the American Medical Association, are made not so *much for that* purpose, but with the intention of bearing against those who differ from them in opinion and in practice. To meet them effectually and successfully, we must rapidly increase our numbers, and thoroughly organize for work. The American Medical Association, at its late meeting in Cincinnati, attracted a good deal of attention; not so much because of the eminence of its members in the profession, as from the political influence they were expected to wield in their respective localities. Thus we have seen an ex-member of Congress, a Mayor, and other politicians who have axes to grind,

giving them entertainments, and saying to them as many pleasant things as the circumstances would allow. They were words cheaply spoken, which they expect to return to them some day heavily laden with increase. We should learn a lesson from this, to use our influence with those who can, and *will* do us, as a branch of the profession, the most good. We must do it by organization. We have organized by counties or districts, and by States, and now we should have a grand organization of the United States. Each lesser organization, takes cognizance of, and provides for the wants of the Districts and States; but the central organization should consider the needs of our cause in the entire country, and provide for them. In thus organizing, we do it for work, and not in order to fix a creed, or bind its members to certain definite rules of action. As in our smaller organizations, its members are left to the enjoyment of that God-given freedom inherited by every one in this favored land, regulated by those great principles of morality, which we learn from the sacred word; so in the larger organizations. But a power given by united effort would be brought against the yielding ranks of allopathic bigotry, and old time despotism, which would, like the well directed fire of artillery when batteries are massed, set them in disorder, and hurl them back, resistless to our onward march.

There is much to be done in the way of perfecting our remedies and presenting them to the profession in a reliable and definite form. The certain result of all our researches and experimentations should be embodied in a form, to be accessible to the profession as standard authority, both for their preparation and for the dose to be prescribed. An eclectic pharmacopœa is needed and should be authorized and prepared by an Eclectic Medical Association of the United States. Such association, by its authorised committee, should have access to all the standard formulæ at the laboratories of those who manufacture those medicines, and who have become rich, not merely by the manufacture, but by the patronage and encouragement of reform physicians. Those physicians, for no selfish ends, but for the great good to result from it, now *demand* that they be furnished for record. When this can be done, we will have a work of incalculable value, which will show the great good we have accomplished in the vast accessions to the materia medica, not only of crude articles, but of reliable and harmless agents, of great potency in

the cure of disease, and so concentrated as to be convenient of administration. Its great value will be that it can be used in the ranks of Allopathy and every other *pathy*, in diffusing the knowledge of those agents, and of the fact that we, as a school, have the credit of introducing them, and establishing their reliability and great value in the treatment of disease.

Are we fulfilling our mission as reformers in medicine? The field of research in the medical profession is almost illimitable. We should not be contented with merely ordinary daily routine duty, but should push our investigations into every field of inquiry. Unlike any other profession, it invites us to researches in all the departments of science. We examine, with minute detail, the intricacy of structure and harmonious working of animal organization, and by the aid of the microscope and the crucible of the chemist, we discover the ultimate constituents of every tissue. We are lost in wonder at the marvelous workings of a force which we are constrained to call vital, from its constant association with living structures, and at the delicate and beautiful forms which it constructs from the dust of the earth and the air we breathe. We look at the beautiful mantle with which nature clothes herself in forest and field, and beneath its surface of varied and dazzling hues, we discover an endless variety of living forms, from the tinniest flower or delicate tendril, to the stately pine or lofty and magnificent oak, braving an hundred blasts. Botany contributes vastly to our knowledge, as it arranges and classifies the numerous vegetable agents of the materia medica, and offers us the means of exploring nature's vast laboratory of vegetable organisms, for still newer and more valuable acquisitions to our stock of remedies. Through chemistry we know of the constituent elements of the tissues and fluids of the body, of the parts most wasted in disease, and the elements necessary to be supplied in the restoration of health. By its processes, our remedial agents are formed, and by a knowledge of it, we can more effectually and promptly apply the proper remedies in disease.

By studying ourselves and the operations of our brain, or the working of the mind, we are led from our intellectual to our moral relations, and then to the consideration of the still more wonderful operation of that higher principle, which though beyond our ken, is yet realized by every one as akin to the Infinite, which will survive the wasting and final decomposition

of the body, imperishable—immortal. All nature is the field of the physician. Mineralogy and geology yield to him infinite stores of profit and instruction, as well as agents to help him in his difficult task. While thus he seeks for instruction and profit from every source, how multifarious and strangely interesting are his daily duties. He wrestles with disease in the countless forms in which it presents itself, and in its varying phases. He may go from the sick bed of a man raving with all the wildness of the delirium tremens, to that of an infant just breathing its life away, without seeing or knowing aught of this world's sin and corruption. How great the contrast! In the one case he has to use all the firmness of actual violence, though his patient be in the grasp of death; in the other he tries to soothe the sorrow of the stricken one, and bind up the broken heart-strings. The helpless and incurable come, expecting to hear a word of encouragement; for life to them is sweet, and the future is an untried sphere, and so he has to gently lead them along without consigning them to despair, by taking away the last hope on which they can lean. How great is his work, and how few are perfectly adapted to it.

Gentlemen — Each revolving year brings to us, as to all, its changes. One of our number, Dr. Hermes M. Sweet, well known to some of us, if not to all, was suddenly taken from us, and from his sphere of labor. He was from the first and during his life an ardent worker in the cause of medical reform, and to it he devoted all his energies. He worked hard, had remarkable success in the treatment of disease, but died poor. He worked for the good he did, and from the natural promptings of a generous nature, not for the recompense it offered. Gentlemen—I applaud the spirit, yet must be permitted to think, that work that requires so much self-sacrifice, and so much mental and bodily labor and fatigue, should be made to pay. A physician, of all men, should get rich, so that if he outlives the fatigues of a professional life, he may have something on which to rest in his declining years. In conclusion, gentlemen, may we, as the succeeding years roll round, and each in his turn is gathered to his resting place, may we, who may survive, be found at our posts, with our armor on, still dealing vigorous blows at error in all its forms, and especially against medicinal bigotry and assumption, still fighting earnestly for the advancement of medical reform, and still *contending for the right of freedom of thought and action in our own profession.*

ARTICLE IV.

Contributions of Eclectic Physicians and Chemists to Science. A paper read at the Fifth Annual Meeting. By H. E. Firth, M. D., of Brooklyn.

Mr. President and Gentlemen of the Eclectic Medical Society of the State of New York.—In introducing the subject relative to the claims of the eclectic school of medicine, to the honor of scientific, experimental and clinical research, I shall assume but one positive position with reference to the subject at issue, viz.: That eclectic physicians claim a closer application than any other class or school of medicine, to that part of the materia medica which relates to vegetable productions and organic compounds.

I might also assume, with safety, that in the application of medicines in general, whether vegetable or mineral, eclectic physicians are far in advance of any other school of medicine; and I might cite evidences to prove that their practice is less depressing to the vital force, and more in harmony with natural laws, than any other class of practitioners.

The term eclectic, as understood by all true eclectic physicians, is an appellation of no mean significance. It anticipates a mind free from the dogmas of schools and the prejudices of sects, and a deliberate and honest searcher after truth. The recipient of this heaven-created principle of selecting the good of all, is placed in the most favorable position for the exercise of all his capacities, and, if supported by education, may attain to the highest state of development; and future history will accord to him a name worthy of the cause he has served.

The progress of intellect and the advancement of the age, are indeed wonderful to contemplate. What has contributed to this lofty development of mind, this onward and triumphant march of intellect, but this very principle of eclecticism; this spirit and tendency of the age to seek for truth wherever found?

Men have determined to throw off prejudice and to occupy a larger and clearer field of thought; and the olden forms and customs of ancient times, are remembered alone for the good they may have contained.

Who can fathom the depth of the undeveloped resources of the human mind, or reveal the hidden mysteries that lie in the womb

of the future? If man has made such rapid advancement, notwithstanding his open and secret violation of the laws of health, what may he not expect when his morals shall become purified and his life governed by the teachings of physiology? Then will arise a new era in the intellectual development of the world, and the present generation will be but pigmies when compared to the greatness of future generations.

Each branch of science has its special investigators, and whilst other specialists are exploring the physical universe, and unfolding the laws that govern objects exterior to man, the physician directs his attention more particularly within himself—to learn somewhat of those laws that regulate the intricate mechanism of the human system and govern its manifold workings, both in health and disease. What improvements have been made by the physician within the past thirty years? What amount of mechanical contrivances have been discovered and applied to determine the heretofore obscure points of disease? What progress has been made in the direction of physical signs and physical diagnosis; and with what determined perseverance are the votaries of science devoting themselves to acquire knowledge? Already, by the aid of mechanical appliances, are we enabled to explore the deep-seated organs and parts of the human body. Beyond the point where unaided vision can reach, ingenious instruments are invented to reflect light. The sense of hearing is also aided by mechanical contrivances, and the ear is being educated to distinguish between health and abnormal sounds. The microscopist and the chemist take their stand side by side, and they not only reveal the nature and constitution of the different tissues of the body, but they estimate the amount and character of the secretions and excretions, and divine the amount of physical and mental labor that man is capable to perform from a given amount of nourishment that he may have consumed.

If the advancement of the literature and science has been so great during the last century, what may we not expect of the next generation? and even from our own labors, if we are faithful to ourselves and to the principles that we possess? Who among us that has attained the age of your humble servant, but can fail to remember the day when railroads were novelties, and the electric telegraph an unsolved problem? Now, we have throughout our continent the tread of the iron horse, with his muscles of brass and sinews of iron, as he urges onward like the rushing wind

and the swift-winged electric spark, as it speeds forth with the rapidity of thought, bearing upon its bosom the tidings of love and the discoveries of science. Aerial navigation, so long talked of, will doubtless soon become a practical fact, and man shall yet command the elements, and cause the rain to descend at his bidding. The star of science which has dawned upon the world will continue to brighten, until prejudice and bigotry, naked and deformed, shall hide themselves, and the Goddess of Liberty, of Religion and Science, shall unite their influences to elevate the physician and qualify him for the honored position of nature's hand-maiden.

It is meet and proper that we should meet as Eclectic physicians under the auspices of the Eclectic Medical Society, (a society chartered by the great State of New York), for the purpose of council, and for the furtherance of science. We meet indeed under favorable auspices; but a short time since our nation presented a scene of carnage and blood; the angel of death hovered over the battlefield, and the smoke of contending armies obscured for a time the banner of liberty. Amid this fearful gloom, when the sons of freemen had to encounter the marshalled hosts of the enemy, the eclectic physician hushed his breath in silence, knowing that the downfall of liberty would obscure the light of science, and the hope of generations. But the war cloud and the gatherings of armed hosts for the conflicts of battle have passed away, and the sea of death that has swallowed up thousands of our countrymen, is changed into an ocean of life, and bears upon its bosom, not the engines of destruction, but beautiful ships, laden with the products of civilization, the legitimate fruits of progressive eclecticism.

We meet for a time in social compact, free from the duties of our usual vocation, and for the purpose of taking on new strength for life's duties. We meet also to interchange the greetings of an exalted friendship, to council, admonish and strengthen each other, and to devise means for the promotion of the interests of our association. May the spirit that should characterize deliberative bodies, possess us; and may the world be benefited by our having assembled together.

Having said a few words upon the spirit of Eclecticism, I desire to make some statements that may have a practical bearing relative to the position the Eclectic physician sustains to progressive medicine.

The subject under discussion becomes a matter of interest partly

from the fact that no definite rule can be established with reference to the administration of medicines. The fact that one agent is an antispasmodic, another an expectorant, diuretic, cathartic, sedative, tonic, &c., will serve but imperfectly to explain the action of the medicine, or to guide the practitioner.

Each medicine has a specific influence, and it becomes the duty of the physician to study these influences upon local tissues, rather than to trust for relief from a medicine, simply because it belongs to a particular class. All medicines will doubtless ultimately be found to be specific in their nature; and just in proportion as we understand the nature of diseases, and the specific action of remedies, will we become successful practitioners. For instance: Symptoms in a given case indicate with certainty that we have an irritated, hyperæmic, or congested condition of the cerebro-spinal nerves; for such a condition (in connection with means to equalize the circulation) experience has proved the utility of belladonna; in such a case nux vomica would not only be contra-indicated, but positively murderous. Again, in paralysis, in which a cerebro-spinal stimulant is indicated, nux vomica may be employed with confidence. It is this minute inquiry into the existing physiological and pathological condition, and selecting medicines to fill specific indications that constitutes scientific medication. I claim that for the salutary, immediate, and specific action of medicine, we must, as a rule, look mainly to the vegetable kingdom. What may we not expect from the yet undiscovered remedies? Digitalis was formerly considered a valuable arterial sedative; but since the introduction of veratrum viride, the physician, watch in hand, may calculate to a mathematical certainty the results of the medicine administered, and may say to the heart, pulsate thus, and it shall be so.

The time will doubtless come, in the history of medicine, when the poison of scarlet fever, measles, small pox, and kindred diseases will find their antidotes in vegetable medicines. Seeing that these statements are warrantable, from the experience and history of the past, let us as Eclectic physicians, go forward in the investigation of all subjects pertaining to medical science. If after exercising our highest capacities, in the most liberal spirit of investigation, we accomplish but little, we may at least lay the foundation upon which future generations may build.

It is now generally understood by a large portion of the community, that Eclectic physicians ignore blood-letting, and the

internal use of corrosive mineral poisons, such as arsenic, lead, antimony, mercury, &c.; but it is not so well understood, that we claim for our branch of the profession, a more thorough devotion to organic chemistry than any other school of medicine, and that, beside adopting all that is valuable in the other systems of practice, we have furnished to the profession a large amount of new discoveries, which are being recognized and adopted by the other schools, as fast as their habits of exclusiveness will permit.

Our physicians are not only discovering new and valuable properties in the, to many, heretofore acknowledged remedies of the materia medica, but by exploring the botanic field, and by clinical tests at the bed-side of the sick, have discovered and established the therapeutic value of numerous plants, and added largely to the list of remedial agents. The Eclectic chemist has by his retort and multifareous chemical appliances, analyzed these various remedies, and by extracting their virtues has furnished the practitioner with the active principle of the plants, divested of their woody fibre and inert materials, thus rendering them at once palatable and efficient.

It is a well known fact that the most important discoveries in modern times have had their origin from accident, or from some small circumstance that served to direct the mind, until the law or principle in the case was made apparent. It is a principle with Eclectics to recognize in the vegetable kingdom a vast field for study, and no circumstances, however small, are considered too insignificant to attract their attention It is thus that, frequently, by tracing phenomena to causes, and effects to principles, the value of many of the heretofore undiscovered remedies have been brought to light. Western men, country and village physicians, those who have a thorough knowledge of botany, and who have an opportunity to witness the growth and development of the various plants, are the most likely to have their minds the more thoughtfully directed, and hence it is that from such sources much information is obtained.

At no period in the history of medicine has an investigation of the properties of our native plants received more attention than at the present day; tests and experiments are being made throughout the various sections of the country, and our physicians are organizing not only State but county societies, where they meet to interchange ideas, and compare notes. Therapeutic properties

are being discovered in roots, herbs and barks heretofore considered inert, and some of the most specific and important remedies in the materia medica are of but recent origin.

If our harvest be so rich while yet so imperfectly organized, what may we not expect when each county in every State shall furnish an organized Eclectic society, from which shall emanate new and important facts to medical science.

The day is fast passing away when the terms "charlatan" and "quack" are applied to eclectic practitioners by the (would be) lords of the profession; but these same self-constituted judges now resort to a more wily and sophisticated form of argument, and claim that they are eclectic; they are the "Alpha" and "Omega" of all true medical science; beside them, there is nothing but uncertainty, nothing but wild and imaginative speculation, that would lead investigators into thick darkness, worse than Egyptian night. They claim, alone, to be the guardians of science; that their system of medicine is hoary with age, and has come down through centuries; that they are the repositories of all medical knowledge, and that all other systems are excrescences which, although tolerated, require the surgeon's knife for removal.

These, then, are the men that less than thirty years ago refused their fever patients a drop of cold water to quench their thirst. That less than twenty years past, bled in almost every disease, not excepting typhoid and typhus fever, and kindred diseases of debility. These are they that mercurialize their patients in almost all diseases, not with the view to cure the disease, but to change its character by instituting another disease, and then leaving the patient to nature's resources for a cure. These are the men that have stormed the fortress of disease with the most potent mineral poisons, and by the most drastic and powerful drugs, with the seeming intent either to kill the disease or the patient, in the attempt.

Do you wonder that humanity shudders and falls back, appalled at the exhibition of this falsely so-called heroic medication? Do you wonder that homœopathists, with their wise professional looks and little pillets, together with kind offices, find welcome advocates and ardent admirers? Do you wonder that, in innumerable instances, nature, left to herself, and unfettered by prostrating drugs, under the supervision of these physicians, accomplishes wonders? Do you wonder that the homœopathic physician so frequently reaps the credit due to the "vis medicatrix naturæ?"

No, you do not wonder; your only astonishment is, that humanity suffered and endured so long; that the triumphant march of progressive medicine has not, e'er this, swept away these false notions, and harmonized the profession upon the only true principle of science to which it must ultimately come, and to which point we should strive as eclectic practitioners.

Let us go forward to the fulfillment of our mission, and (until medicine shall be established upon fixed principles of science) continue to select from all systems of practice the best means and modes of treating disease; and whilst we exercise the right to criticise all plans or systems of practice, let us endeavor to exercise our capacities in a true eclectic spirit, without prejudice.

Let the electrician (if he will) cherish the belief that he can cure all diseases with electricity; let the hydropath, without the aid of drugs, wash away infirmities; let the mesmerizer and psychologist display their matchless power, and when human instrumentality fails, call to their aid spirit agency from the far-off spirit world; let the followers of Hahnemann embrace more closely their favorite dogma "simmilia simmilibus curanter," and attenuate and triturate their remedial agents, until etherialized and spiritualized, they shall be rendered capable of electric speed and potency, to penetrate every particle of human tissue, and eradicate every vestige of disease; let allopathy glory in ancient prestige, and claim an unbroken line of succession; let them depreciate and condemn those who may deny their right to dictate codes of ethics, or principles of practice; let these votaries of "Old Physic," of calomel and the lancet, ostracise, either socially or professionally, those who claim to be liberal or eclectic; let them hold up their hands with perfect horror against these so-called irregulars; let them seek and obtain political influence and positions of honor for the usurpation of authority; yet, the true physician, he who recognizes his responsibility to God and his duty to man; who will travel in the line of duty at the expense of personal sacrifice; who will not stoop to pander to the prejudices of any; who ignores the customs of society, if those customs conflict with health or integrity; who will follow the teachings of authority only so far as they accord with reason, or are sustained by facts; who respects the honest opinions of men, but who claims the right to think and act for himself; who cherishes the esteem of the good, but is not traduced by plotters; such an one, true to the instincts of humanity, true to the teachings of science, true

to the interests of an advancing civilization, true to himself, true to the principles of a purified eclecticism, will go forward with undying energy and indomitable perseverance, until pathies shall give way to principles, and the man of medicine be but the physician, the man of science.

ARTICLE V.

The History of Medicine. An Address delivered at Fifth Annual Meeting. By H. C. GAZLAY, M. D., of Cortland.

Mr. President and Gentlemen of the Society.—In the primitive ages of the world, medicine appears to have been little else than a collection of absurdities. The human mind, influenced by superstition and untaught by experience, associated the idea of religion with medicine, and, consequently, resort was had to charms and incantations, in full confidence of preventing and curing every malady. Hence, during the early part of the history of our species, ignorant priests, magicians and astrologers were their only physicians.

The first beginning of medical science was considered by the ancients as something divine, and the individual who was in possession of the knowledge of the art of curing disease as worthy of veneration.

Æsculapius was the first person on record who collected all the known remedies then in use. He founded a temple in which they were suspended for the benefit of the diseased. Æsculapius was the son of Apollo and Coronis, the daughter of a Thessalian king. His father placed him under the care of the wise centaur, Chiron, who taught him botany, together with the secret efficacy of plants. By means of this information, Æsculapius became the benefactor of mankind, applying the various remedies that he had learned to the diseases which afflict the human race; and so successful was he in the practice of the art, that fiction speaks of him as having awakened the dead.

Pluto, the ever-destroying power, considering this an encroachment on his rights, complained before the throne of Jupiter of the awaker from the dead as a daring criminal. Jupiter then punished the second great benefactor of mankind, as he had done the first (Prometheus), by hurling lightnings upon his innocent head. He who had assuaged the pains of men, and healed their diseases, thus became himself a victim of his beneficent art. After his death, groves, temples and altars were consecrated to his memory.

The snake, as an emblem of recovery and health, was sacred to Æsculapius; probably, because of its renewing itself, as it were,

by casting its skin. Hence, the god of medicine always carries a staff, around which is entwined a snake. The figure of a little boy is sometimes found with that of Æsculapius, wearing a bonnet on his head, and entirely muffled in a cloak. His name is Telesphoros, and his infant form, together with his usual covering, seems to allude, in a certain manner, to his convalescence, as well as the mysterious art of his master.

The temples of Æsculapius were regarded as sanctuaries, which none of the profane could approach without repeated purifications; and the statue of Hygeia at Egrium, in Achaia, could only be viewed by the priests.

The temple of Tithorea was surrounded by a hedge, in the vicinity of which no edifice could be erected.

The worship rendered to Æsculapius had for its object the diversion of the sick, by the ceremonies of which they were the witnesses.

The practice of medicine must have everywhere arisen from the accidents and infirmities to which mankind are liable. Some rude appliances to wounds and injuries, some equally rude observances in cases of internal disease, are common among the most barbarous people. The idea that disease is caused by the anger of superior and invisible beings, placed its treatment in the hands of the priests, and the same idea caused that treatment to consist mainly of superstitious rites.

The temples of Æsculapius were from an early period the resort of the sick, who submitted themselves to the regulations of the Asclepiadæ, the priests of the temples, who thus had large opportunities for the study of disease. Beside the temples of Æsculapius, the philosophic schools,—the Pythagoreans, who visited the sick at their residences, and the Gymnasiarchs,—contributed more or less to the advancement of medicine.

In these various ways medicine had already made sensible progress, when Hippocrates (born in Cos about 460, B. C.) collected the scattered knowledge of his time, and added to it by his own genius and observation. Of the numerous works ascribed to Hippocrates, enough are decided to be genuine to justify the veneration in which he has always been held as the father of rational medicine. His notions of anatomy must have been derived from the study of animals, since the religious prejudices of the ancients prevented the dissection of the human body, until a much later period. His physiology was as imperfect as his anatomy. He

regarded the glands as spongy bodies, destined to absorb moisture from the neighboring parts, and the brain, the largest of the glands, draws the vapors from the whole interior of the body. He taught that the body was composed of four elements, differently combined in different individuals, and derived from them the four humors of the body, blood, phlegm, bile, and black bile, from which again are derived the four elements.

Disease, says Hippocrates, consists in a disordered state of the fluids; these are subject to coction, which, when complete, terminates in a critical evacuation, the localization of the disease, and the formation of a critical abscess, the occurrence of erysipelas, &c. When coction could not take place, the disease was mortal. Crises were apt to occur on certain days, and hence were termed critical days. He speaks of a principle which he terms nature, which influences every part of the human frame, superintends all its actions, promotes those that are beneficial and represses those that are injurious; the great object of the physician was to watch this principle, to aid or restrain it, rarely to counteract it. Happy indeed would it have been for suffering humanity, had not physicians departed from this principle, and substituted art in place of the indications of nature for the removal of disease.

A modern professor while lecturing to a class of medical students, in reference to the efforts of nature to restore health, says: "Kick nature out of doors, we have nothing to do with her, and substitute art."

Acute diseases only were considered subjects of medical treat ment, as chronic diseases were regarded beyond the resources of the art. Before the rise of the Alexandrian school, dogmatism or rationalism, fortified by the authority of Hippocrates, had been the prevailing system. The dogmatists maintained, that in order to treat disease we must be acquainted with its occult as well as existing causes, and with the natural actions of the body. This doctrine was opposed on the ground that the occult causes of the dogmatist depended entirely upon hypothetical opinions; that the minute motions and changes of the internal parts were beyond our observation; that even where the cause of a disease was known, it by no means followed that such knowledge led to a remedy; and that close observation of disease, and experience of the effects of remedies in its treatment were the only safe guides to medical practice.

The new doctrine, or empiricism as it was termed, long divided

medical opinion with dogmatism, though the writings of its advocates have entirely perished, and we are acquainted with their views mainly through the summary given by Celsus.

About one hundred and fifty years after the origin of Empiricism, Asclepiades, of Bythinia, at first an eminent rhetorician, and as such honored with the intimacy of Cicero, began to practice medicine at Rome. He founded a new medical doctrine on the theories of Epicurus, which, aided by the popularity of the Epicurean philosophy, as well as by its novelty and simplicity, soon found numerous followers. According to his theory, the human body is permeated in every direction by pores, through which, atoms varying in form and volume are constantly passing. Health consists in the symmetry between the pores, and the atoms which pass through them. Disease is an obstruction of the pores, or an irregularity in the distribution of the atoms.

Asclepiades, it is said, was the first to divide diseases into the two great classes of acute and chronic. While the dogmatists made the fluids the prime seat of disease, and ascribed the origin of all maladies to some alteration in them, the methodists on the other hand, thought the solids were first affected, and that the derangement of the humors was but secondary; and the dispute about the humoral pathology and solidism thus originated, has, under various forms, continued to our own time.

Pliny states that Rome had no physicians for six hundred years; not that no attempt was there made to cure diseases, but that those attempts consisted mainly of superstitious rites. Thus, according to Livy, following the advice of the Sibylline books, pestilence was repeatedly stayed at Rome, by erecting a temple to Apollo or to Æsculapius, by celebrating public games, or by the Director driving a nail into the Capitol; and Cato, the censor, trusted to simples, with charms and incantations.

Medical opinion continued to be divided between the dogmatists and empirics, until the time of Galen, who was born in Pergamus about the year of our Lord one hundred and thirty.

He effected a great revolution in the practice of medicine, and reduced it to a science; his authority continued to be regarded in the schools, for more than twelve hundred years, with implicit veneration; even a fact was disputed, if it was against the authority of Galen. He was instructed in all the learning and philosophy of the age, and obtained a popularity which surpassed that of all others: he deviated from the beaten path, rejected the pop-

ular systems and selected what he deemed best from other schools, thus becoming a true Eclectic.

While practising at Rome the persecution raised against him by the popular physicians was so great that he left; he was, however, soon recalled by the emperor, who had so high an opinion of his medical skill that he placed two of his sons under his charge, in whose cases, Galen, contrary to the opinion of the other physicians, predicted a favorable result, which prediction was verified. This rendered him so eminent that opposition was thenceforward unavailing. He adopted the Hippocratic theory of the four elements, the four humors and the four qualities, elaborating and refining upon them at great length and with great subtlety, and making them the groundwork of his doctrines. Besides the solids and the fluids, he assumed a third principle—the spirits—as entering into our composition.

These spirits were of three kinds: The natural spirits, derived from the venous blood; the vital spirits, formed in the heart by the action of the air we breathe upon the natural spirits, and which are driven through the arteries; and the animal spirits, formed in the brain from the vital spirits. He also supposed the human soul to be composed of three parts: A vegetative, residing in the liver; an irascible, in the heart; and a rational, having its seat in the brain.

From the time of Galen, medicine began to participate in the decline which had already overtaken art and literature. Dissections were no longer made, the earlier Christians having as great a horror of profaning the dead body as the pagans; and medical writers, appearing at rare intervals, contented themselves mainly with copying or abridging the works of Galen.

From the ninth to the thirteenth century, the Jews, acquiring in their commerce with the Saracens such knowledge as was possessed by the latter, became celebrated as physicians, and as such, despite the laws which forbade them to administer remedies to Christians, obtained access to courts, and even to the palace of the Roman Pontiffs.

As literature and science revived in the western empires, medicine and surgery improved. Physicians in the middle ages being invariably priests, whom a canon of the church forbids to shed blood, surgical operations commonly fell into the hands of an inferior and ignorant class of barber surgeons who frequently were itinerants. Subsequently the clerical physicians would

occasinally operate, while the barber surgeon struggled to raise himself to a higher rank.

Gui de Chauliac, a learned priest, who published about the year 1363 the earliest modern work on surgery, performed operations; while in the sixteenth century the great anatomists Vesalius, Fallopius and others were likewise distinguished surgeons. It was from Ambrose Pare, however, who commenced his career as a barber surgeon, that surgery received its greatest impulse.

At that period wounds received from firearms were considered poisonous, and it was customary, on this account, to cauterize their track with boiling oil. In 1636, on one occasion, while serving as surgeon with the French army, Pare's supply of oil failed him. He could not sleep for anxiety, but in the morning he found that those who had not, were doing better than those who had been cauterized, and the observation thus made soon led to a revolution in practice.

The application of the ligature instead of the actual cautery to restrain hemorrhage after amputations was another of his discoveries. On account of this discovery he was ridiculed for daring to suspend the life of a fellow creature upon a mere thread. While the authority of the Galenists was disputed by the anatomists on matters of facts, his opinions were attacked by a new school of physicians who were the off-shoot of the prevailing study of alchemy. Of this school, Paracelsus obtained the greatest notoriety. He publicly burned the works of Galen and Avicenna, but had nothing to substitute for them but wild and incoherent speculations. This man deserves more than a passing notice, especially as he introduced the mercurial practice, and, as from him, the (so called) regular system of the present day derives its parentage.

Paracelsus was born in Switzerland about the year 1493. Dr. Robert Hooper thus speaks of him: "His father is said to have been a practitioner of medicine, and inspired him with a taste for chemistry. He very early commenced a sort of rambling life, assuming the pompous names of Phillippus, Aureolus, Theophrastus, Paracelsus, Bombastus de Hohenheim, and after visiting the schools of France, Italy and Germany, he sought for information during several years among quacks of every description, pretending that he had found the principles of the medical art altogether erroneous.

He appears to have possessed the talent of imposing upon mankind in an eminent degree, for even the learned Erasmus is said

to have consulted him. It cannot be a matter of surprise that, by the bold use of active medicines, especially mercury, antimony and opium, he should have effected some remarkable cures; these cases were displayed with the usual exaggerations, while those in which he failed or did mischief, passed unnoticed. His reputation, however, became so great, that the magistrates of Basle engaged him, at a large salary, to fill the chair of medicine in their university. Accordingly, in 1527, he began delivering lectures, sometimes in barbarous Latin, oftener in German; but, though he gained at first some enthusiastic adherents, the ridiculous vanity which he displayed, despising every other authority in medicine, whether ancient or modern, soon created such disgust, that he was left without an audience. A quarrel with the magistrates on account of a decision against his demand of fees, which was deemed exorbitant, decided him in the following year to leave the place. He subsequently resided in Alsace and other parts of Germany, leading a life of extreme intemperance, in the lowest company; yet occasional instances of extraordinary success in his practice, still preserved him some reputation, notwithstanding numerous failures. But the most striking proof of the folly of his pretensions was given in his own person; for, after announcing that he was in possession of an elixir, which would prolong human life to an indefinite period, he died at Saltzburg, in 1541, of a fever.

Says a writer: "He may perhaps be called, with justice, the most distinguished quack who ever made a figure in the world." He practiced medicine with the boldness of a wandering empiric, and mingled his medical and chemical knowledge with the speculations of the cabbala, and with a theosophy of his own. He first introduced mercury, or quicksilver, as a medicine; and all who thus administered it were denominated quacks, in allusion to the name quacksalver given to this metal by the Germans. He became intolerably vain-glorious, boasting that there was more knowledge in his beard than in the whole of Galen. He was likewise shockingly impious, declaring, that if God would not impart to man the secrets of medicine, it was right to consult the devil.

Such, then, was the personage to whom we are indebted for the introduction of the mineral practice, which has continued to the present day, entailing misery on the human family to an amount beyond all computation.

The great anatomists of the sixteenth century had paved the

way for the discovery of the circulation of the blood; Servetus had proclaimed the lesser circulation through the lungs; the valves of the heart, of the aorta, and of the veins were known. It was proved, by experiments on living animals, that when an artery was tied the blood no longer flowed, and the pulse ceased on the side most distant from the heart; that when a vein was tied it swelled below the ligature, while it became empty on the side toward the heart.

In 1628, William Harvey, an English physician, after having taught the circulation of the blood in his lectures for twelve years, during which he had ample time to confirm his opinions by reiterated experiments, announced his discovery to the world. This brought on him the most unjust opposition, some condemning it as an innovation, others contending that it was known before; but he had the satisfaction of living to see the truth fully established. The true theory of respiration soon followed the discovery of the circulation. The end of the last century witnessed the most important practical discovery ever made in medicine.

Up to that period, small-pox annually committed the most fearful ravages; the deaths from it in Europe alone were estimated to amount to 400,000 a year, while it left many others blind or disfigured. The practice of inoculation, brought from Constantinople by Lady Mary Wortley Montagu, had indeed diminished the evil, but the remedy itself was attended with great inconvenience, and was not devoid of danger.

The discovery of Jenner, of London, announced in 1798, has placed the disease completely under our control, and if it still commits occasional ravages, it is owing to the laxity of the laws and carelessness of individuals It does not detract from the fame of Dr. Jenner that he did not first discover the fact that a certain kind of sore, found upon the udder of the cow, produced a similar infection upon the hands and arms of those who milked them, and thus rendered such persons proof against attacks of small-pox. These facts were well known and frequently acted on, previous to the time of Dr. Jenner, though up to his time the same disease had not been transmitted from one person to another, and thus indefinitely continued. It is, therefore, due to him that those who either speak of or write upon the subject of vaccination, should repeat the important truth, that Dr. Jenner conceived the thought that this most fatal scourge of mankind could be prevented by a per-

petual propagation from one individual to another, of a harmless disease, having its origin in the cow. It was a happy thought.

Since the commencement of the nineteenth century, medicine has made greater advances than in any other similar period. This may be attributed to the discoveries which chemistry has brought to our aid, enabling us to comprehend more clearly the processes of nutrition, respiration, calorification, secretion and excretion; to the microscope, by the aid of which the mode of the development of the germ, the organization and growth of the tissues, the process of inflammation and repair, have been investigated; to the progress of physiology and comparative anatomy; to new and more perfect methods of investigating disease, by the aid of auscultation and percussion, thus rendering diagnosis more certain. Much is due to the discovery by pharmaceutical chemists of the active principles of various drugs, roots and plants, in separating those principles from the crude mass, thus rendering them more certain in their effects, less nauseous, and in doses which the stomach is more certain to retain.

The materia medica has also been enriched by the discovery of various new remedies, rendering diseases, previously obstinate and unyielding, more completely under our control.

The discovery of anæsthetics is one of the greatest boons medicine has ever conferred upon suffering humanity; by the aid of which amputations, and all other operations, which were formerly regarded with horror, can now be performed without the slightest pain, with perfect safety.

As illustrating the conflicting opinions of medical men, in regard to the *modus operandi* of remedial agents upon the animal economy, the system of Homeopathy is conspicuous. The founder of this system was Samuel Christian Frederick Hahnemann, who was born in Saxony, April 10, 1755. The distinguishing characteristic of this method consists in its employment of medicines agreeably to the principle that "like cures like," and its recognition of this precept as the sole law of cure; or to state it in other words, in its choice for the sick of such drugs as have produced in the healthy subject the symptoms present in the malady under treatment. It is contended by the advocates of this system that glimpses of the truth of the law, "Similia similibus curantur," had already occurred in the earlier history of medicine, yet Hahnemann was the first to assert its value and to institute the labors required in its practical adaptation to the cure of disease. In 1790,

while engaged in translating Cullen's "Materia Medica," his attention was arrested by the prevailing theories of the *modus operandi* of Peruvian bark, and led him to experiment with this remedial agent upon his own person. The trial resulted in the production of a species of ague resembling that form for which bark had proved most uniformly specific. To his mind this was the revelation of a principle. It was, indeed, the key to the generalization of the action of drugs which stamps his system of medicine.

Stimulated by his new idea, he tried other remedies upon himself, noted carefully their effects, and began to treat diseases accordingly. Until about the year 1815, the size of the dose he habitually used, though far less than previously employed by physicans, was still not in striking contrast with the received ideas. The subsequent change in his views on this subject is announced in the following note, appended to a record of a case, illustrating some instructions in the method of prescribing, and in which the dose administered was a whole drop of the juice of bryony root. "The latest improvements in our art demonstrate that the administration of a single smallest-sized pellet (a sugar globule of the size of a mustard or poppy seed), moistened with a decillionth attenuation of the drug would have been fully adequate to perform this cure; nay, it is equally certain that even smelling of it would have sufficed; so that the dose employed in the foregoing case is no longer to be commended to imitation." Also, in his work termed Organon, the following directions are given for administering the medicines: "The best mode is to make use of small globules of sugar, the size of a mustard seed." One of these globules having imbibed the medicine, and being introduced into the vehicle, forms a dose containing about the three hundredth part of a drop—for three hundred of such globules will imbibe one drop of alcohol; by placing one of these on the tongue and not drinking after it, the dose is considerably diminished.

But if the patient is very sensitive, and it is necessary to employ the smallest dose possible, and attain at the same time the most speedy results, it will be sufficient to let the patient smell one. The manner of preparing the dilution above referred to, is as follows: One drop of the juice of bryony root is put to ninety-nine drops of pure alcohol, forming the first dilution, each drop of which contains one one-hundredth of a drop of the active agent; of this solution, one drop is taken and added to ninety-nine drops of fresh alcohol, to make the second dilution; in a

similar way, the third, fourth, successively, up to the thirtieth dilution, are prepared; the last of these containing, in each drop, one decillionth of a drop of bryony juice. Other dilutions, however, than the thirtieth, are also employed by the homœopaths; the eighteenth, fifteenth, twelfth, ninth and sixth, being, perhaps, the favorites. Incredible as their statements may appear, experience is said nevertheless to prove that exquisitely minute doses are sometimes powerful, and that, too, under circumstances when no faith, either on the part of the patient or the doctor, can be honestly adduced in explanation of their virtue. It follows logically that if one agent has the power of influencing the human system, in minute doses, then all may; and that calomel, corrosive sublimate and arsenic, which the homœopaths are constantly prescribing, may produce their specific effects in the form of salivation, soreness of the mouth and gums, stiffness and swelling of the joints, &c. Such instances do occur. A distinguished dentist of New York was indisposed, and called a homœopathic physician. He requested the doctor to give him no mercury; but, contrary to his express desire, he gave both mercury and arsenic, which were absorbed and produced injury of all the joints. They were swollen stiff, and contracted, and for a time he was unable to walk.

It requires but a limited knowledge of the history of medicine to observe, that from its commencement every age has teemed with the controversies of those who have made medicine their profession. Revolutions and modifications in the theories and the agents employed have succeeded each other rapidly. The ambitious and the learned have ever been striving to perfect the art of healing, but in no field of labor has the weakness of human wisdom been more manifest than in the cultivation of medical science. Everywhere during the past, the cotemporaries or successors of those who supposed that success crowned their labors, and perfection their theories, have contested their principles, exposed their errors, and despoiled them of their glory.

The versatility of human systems, with few exceptions, has, until the present century, manifested itself in a regular succession of theories; and since then, in many cotemporaneous and widely dissimilar hypotheses. As superstition and ignorance are twin sisters, it is not to be wondered at that the record of many ancient absurdities are extant, relative to belief in, and the practice of, medicine. Credulity was man's first error—an error which, since that moment, has been continually repeated. And, it would seem,

the greater the deceit the less it was doubted; the greater the delusion the firmer it was credited. The misletoe, for instance, was formerly supposed to be a specific for peculiar disorders, and because its leaves and berries grew in clusters of three, deemed by the Druids a mystical number, they held it in profound veneration—so much so, that at the close of the year the priests went in solemn procession to gather this parasitical plant. Prescribed ceremonies attended its removal from the oak; a priest, habited in white, cut it off with a golden knife, and the detached branch was solemnly received in a napkin beneath the tree commonly selected for their worship.

The shamrock, in Ireland, was regarded in the same light, and therefore held as sacred. These and many other superstitions were doubtless derived from Jewish sources, especially from the Reabbins, a remarkably fantastical and fanatical tribe. Indeed, there is a marked similarity between religion and medicine in their earlier progress. Both were originally mingled with absurdities. In connection with the former these were termed superstitions; when applied to the latter, quackeries. Both advanced but slowly, whilst prejudice and bigotry impeded (and still impede) that advance in both, especially in reference to medicine, it being more prominently under the control, and subject to the caprice, of human intellect, crippled and thwarted by the short-sightedness and fallible deductions of our cramped comprehensions. In fact it may safely be asserted that nothing, except religion, has had so many delusions connected with it as medicine. Alike remedial in their nature, no sooner had man brought death into the world and all our woe, than they began their mission of good to the fallen.

Though alienated from his God and enlisted in rebellion against his maker, man could not throw off all impressions of religion. Its elements were with him, they were implanted in his very nature, and hence, harrassed by a sense of guilt amid impending danger, man has devised a thousand schemes for the redemption of his soul. Nothing has been deemed too costly; nothing too cruel; nothing too revolting for him to advocate and adopt. To this day Hindoos and Mahometans observe their several superstitious rites, and expend vast sums of money on their cherished delusions; the object in all which is the attainment of a perennial inheritance of untiring sensuality in a future state; in other words, these so-called but misnamed religious observances are devised and

embraced for the supposed benefit of an anticipated immortality; they are considered remedies for the soul. No wonder, then, that schemes equally unreasonable and unavailing have been conceived and cherished to renovate the health of the body. No wonder, then, that many believed in the performance of mystic rites and magical incantations; that many submitted to prescribed ceremonies and alleged charms, the more immediate design and effect of which were to work on the imagination of patients.

And though the knowledge of medicine increased with every generation, superstition meanwhile engendered impositions, and hence each era produced impostors, seeking gain from their fraudulent pretensions. The incurable, that is, they for whom philosophy in its infancy had discovered no remedy, eagerly adopted any expedient recommended, and implicitly confided in all who professed the ability to heal them. Thus, as religion was contaminated with priestcraft, an issue of superstition, so was medicine prostituted to quackery. Hedged in by close and narrow views, the science could but revolve in circles of hypotheses. The facts seen in a single aspect were alternately explained by the principles of fictitious theories which sooner or later gave place to others. The disposition to view all the phenomena of medicine in the light of humoralism, solidism, vitalism, spiritualism,—as mechanical, chemical or galvanic,—seemed universal.

Within the past century, since the various sciences have been more generally cultivated, systems quite as distinct in their philosophy contend eagerly for favor at the same time. Allopathy, though venerable by its age and mighty in its scientific achievements, lost gradually the confidence of many enlightened minds, both in and out of the profession. Hundreds expressed themselves more willing to meet the consequences of disease, however direful they might be, than to take treatment "secundum artem."

In consequence of palpable and monstrous errors in practice, tenaciously adhered to, dissatisfaction became, we may say, almost universal. Those who were compelled to take treatment, did it with a horror or dread, and a propensity to dictate or entreat their physician to spare their vital fluid, and to save them from the lamentable effects of mercury and other poisonous mineral agents.

As new discoveries and reforms make their advent when there is a great public want for something of the kind, so when the errors and abuses of allopathy had become so conspicuous as to be

generally appreciated and scarcely tolerated, new systems arose, not like the fabulous bird from paternal ashes, but from an unsatisfied want of the times.

In Europe, homœopathy, kinesipathy, chrono-thermalism and other systems of cure, found multitudes ready to test their virtues, and in the United States no less a number sought relief from their maladies in Thomsonism, Botanicism, and the above named systems, which have been extensively propagated in this country as well as in Europe. No one should pretend that these systems and fragments of systems do not possess distinctive features, and that the principles of each are not exclusive and limited. The originators and advocates of each of these modern and innovating systems, dazzled by an idea which promised amelioration of suffering, forsook all else and wedded themselves to, and worshipped and magnified, each their favorite dogma.

We are not called upon to discuss any claims of such to an eclectic and liberal policy. They are specially liable to the charge of exclusiveness. As fragments of truth are observed to be thus scattered through various systems, to sift and analyze each, and gather from them all that which common sense, science and successful experience alike dictate, constitutes Eclecticism.

Where then do we find a system of medicine which is emphatically eclectic? Many intelligent members of the allopathic school claim that their system is alone entitled to be regarded as such. But allopathy has made itself exclusive by denying that any of the innovating systems possess valuable peculiarities or excellences not possessed by itself. It has been eclectic within certain limits. Theories and measures which emanated only from European schools and from strictly orthodox writers, have been employed by members of the allopathic system generally, to subserve the purposes of their profession.

Many like Dixon, of London, possessed of extensive experience and a good degree of scientific knowledge, have raised their voices against the system of depletion and other barbarous measures, and because of the heterodoxy of their sentiments, allopathy has persistently closed her portals against them. Those whose convictions led them to adopt the principle "Similia similibus curantur," with a desire to make their practice more innocent and safe, were, with their system, condemned without reservation.

The pretensions of Hahnemann to limit the power of medicine, in curing disease, to a certain mode of action, and a universal law,

which is far from being generally applicable, and his superfluous twaddle about dynamic medicines, highly potentized by shakes and triturations, and about infinitesmals and psora, made his system, in most particulars, absurd and insane.

Allopathy has blinded itself to the investigations which homeœpaths have made in Therapeutics, to their discovery of a few and their new application of many valuable remedies. It refuses to be taught by homœopathy the utility of a strict dietetic regimen, also the curative influences of mental and emotional treatment, and the greater reliance to be placed in all diseases upon the "Vis Medicatrix Naturæ." Allopathy could not stoop to learn the least in Hygiene or Therapeutics from such arrant quackery. Those who ventured abroad to explore the fertile fields of our indigenous Materia Medica, and found their labors rewarded by the discovery of a large number of efficient and valuable medical agents, were not welcomed home by their more timid and conservative brethren, as is the naturalist who wanders from his comrades and furnishes new contributions to science, with greetings and honor. No, they are hissed at, condemned, and considered no longer worthy of fellowship. Some of the most valuable agents have, from time to time, been brought to the notice of the old school profession, by those who may have found them in the hands of blundering empirics, and these have been rejected and cast off, to add to and strengthen the resources of new and irregular systems.

The system of Samuel Thomson and his followers, though adopted mostly by those of superficial medical attainments, embraced features and measures which, under most circumstances of their application, were far preferable to the heroic and leading measures of allopathy. It was the first great lever which helped to sunder medical science in this country. Through its instrumentality the utility of a more sanative treatment was demonstrated to the public, and the properties of the articles composing our vegetable Materia Medica have been developed. The success of the Thomsonian measures commended the system to a large proportion of all classes of citizens, and until an ampler system stole its thunder, was in growing repute, with all except the allopathic fraternity. They denounced everything pertaining thereto, as consummate quackery, and nurtured more and more their hatred of innovation, and particularly their contempt for roots and herbs. Such being the truth in reference to allopathy, how could it be

claimed that the system had been in the true sense of the word Eclectic? The American Eclectic system or new school of medicine was founded about forty years since, by Dr. Wooster Beach, a graduate of the University of New York. Becoming disgusted with the depletive and mineral system, he retired from practice and for a time engaged in mercantile pursuits. At length he became acquainted with the noted Dr. Jacob Tidd, a botanic physician of New Jersey, who obtained his medical knowledge of a German physician of high standing; and afterwards obtained much valuable information from a relative who had been taken prisoner among the Indians. Forty years' experience, united to these advantages, had acquired him a reputation as a successful practitioner, that had spread far beyond his immediate sphere. Dr. Beach, determining to avail himself of all the means of obtaining the requisite knowledge, visited Dr. Tidd, studied medicine with him, and, after remaining with him until his death, succeeded him in practice. About this time a number of practising physicians assembled in New York to commence a medical reform. They had previously passed the requisite examination, and received their diplomas from allopathic colleges; they were no questionable pretenders, but tested physicians; they had been Old School practitioners, even as Luther had been an Old Church preacher; they, like him, dared to establish a reformation; in both instances the product of wise men's investigations—the result of converted enlightened teachers, so that while Protestants renounced the power of the Pope, Eclectics discard the theories of Paracelsus. Thus, the New School had its origin; and it has been steadily increasing in popularity and favor with the people, until, at the present time it has several chartered medical colleges, and numbers from 8,000 to 10,000 practitioners. The principles which serve as a basis to the American Eclectic practice may be enumerated as follows:

1. That it is the duty of physicians to ascertain the full effect and mortality of disease when left to the unaided efforts of nature, thereby determining the advantages of medication.

2. A determined effort to fully ascertain the law or laws of Therapeutics and to demonstrate the modus operandi of medicines upon healthy and diseased tissues.

3. To prosecute a series of critical researches into the nature, properties and curative power of all indigenious as well as other remedies.

4. To introduce into the profession a spirit of liberality and progress, to dispense with all creeds and cliques, to overcome party prejudice, recognizing the right of all well educated physicians to enjoy such opinions in medicine as science, experience and conscience may dictate.

5. That it is the duty of the physician to fully investigate allopathy, homeopathy, hydropathy, and all systems of medicine, appropriating all their valuable resources for the cure of disease.

6. That recent pathological research and extensive clinical experience have demonstrated that mercury, antimony, arsenic, and the entire catalogue of mineral poisons, when introduced into the system, materially impair the integrity of the constitution and act as exciting and predisposing causes of a most fearful catalogue of disastrous maladies; and that all diseases for which these remedies are administered may be more successfully treated by the use of the concentrated and other Eclectic remedies.

7. That the pharmaceutical method of compounding a great variety of medicines into syrups, pills, &c., not only prevents the relative curative power of the remedies from becoming known, but often their action is neutralized and the object for which they are administered defeated.

8. To discourage, by every honorable means, the baneful practice of constant drugging for every trifling disease.

9. To investigate and adopt physiological and hygienic means of curing and preventing disease by a proper regulation of the diet, temperature and purity of the air; by bathing, friction, proper clothing, occupation and mental and physical training, without which all systems of practice must be unsuccessful.

10. That it is the duty of every physician or student of medicine, before assuming the responsibilities of the profession, to acquaint himself most thoroughly with anatomy, physiology, surgery, materia medica, chemistry, obstetrics, pathology, therapeutics, principles and practice of medicine, and to pursue a regular curriculum of medical studies in some well organized medical college, and to devote much time to the study of clinical medicine in hospitals and other institutions for the sick.

11. That it shall be the object and aim of eclectic physicans to fearlessly investigate all systems of medicine, not only to expose their errors, but to make their valuable resources available in the treatment of disease.

12. To avoid adopting any set of dogmas as infallible, remem-

bering that what men may suppose to be true to day, may by future research be found erroneous.

13. To prosecute their researches in every department of medical science, so long as premature death and fearful mortality demonstrate the imperfections of the healing art.

Besides the very liberal and progressive principles which the eclectic profession have adopted, to guide and assist them in their labors, they hold very different views from those entertained by the allopathic school, relative to certain doctrines of pathology. They have discarded blood-letting, because ample experience has demonstrated the practice to be absolutely injurious—to augment rather than diminish the fatality of disease. Eclectics regard the pathology of inflammation as most positively contra-indicating the use of the lancet, while allopathists entertain the opposite opinion, and consider bleeding especially demanded. Instead of inflammation being an accumulation of blood in the inflamed part, as the result of augmented vital action, as taught by allopathists, the eclectic profession assume that it is caused by a deficient vital power; that this exhaustion of the vital forces produces a dilitation of the capillaries, accumulation of blood &c.; that the essential changes which take place during the progress of inflammation, occur not as the results of vital transformation, but as the result of increased chemical forces, which always exist whenever the vital forces are diminished. Hence the difference in treatment. The allopathist, according to his notions of pathology, would bleed, blister, and employ other debilitating agents, while the eclectic, taking an opposite view regarding the disease as the result of debility, would administer tonics and such other remedies as would support the vital power. To remove the immediate effects, he would attempt to equalize the circulation by attracting the blood from the inflamed part to other portions of the body, thus relieving the local affection. The practical result of the two theories conclusively demonstrate the truth of the latter, were there no other proof of its correctness. But recent pathological research is conclusive on this point, so much so that even the most obstinate of the allopathic profession have in a measure abandoned their absurd pathological hypothesis, and the practice founded upon it. Not only have the eclectic profession joined issue with the old school upon the pathology of inflammation, but upon most other diseases.

From time immemorial there has been a class of physicians who have claimed to be regular and legitimate, and have assumed to

themselves not only all knowledge of the healing art, but exclusive authority to practice that art. All others, no matter what their skill, experience, or general qualifications, have been looked upon as interlopers and intruders on forbidden ground.

True, the regular and legitimate standard has varied greatly, and still continues its fluctuations as widely as a respectable weather-cock; but this is a matter of course,—the old race, assuming all knowledge, can never admit that any new theories, new modes of medication, or new remedies, not of their own school, have any value in them, or that the advocates of such have any claims to the character of medical men. Regular medicine is medicine according to rule. The regular medicine of a class is such as follows the rules of that class. Nothing is deemed regular which has not their sanction, and nothing which has not been tried and proved in their furnace. What then is their rule, and how is the trial made? The rule is to select the worst and most dangerous poisons, and then to make trial of them by ruthless experiments on poor suffering humanity. They sneer at homœopathists because these, with a heroism and disinterested benevolence that are seldom followed, make their experiments on themselves. They sneer, also, at eclectics, because this class will not use mineral poisons in any form; and they spurn all outside inquiry and all patient investigations not of their own school. Thus their rule is a series of most painful and fatal experiments on the sick. A few heroic remedies in most common use are first tried in a given case, and if these fail to cure, then follows the regular course of most approved and reckless experimenting.

Other medicines, known to be fearfully poisonous, are tried, very commonly beginning with small doses and increasing as the patient can bear. Whole battalions of victims, regularly slain in this way every year, go to swell the hecatomb and make up a system of regular medicines. These victims trust themselves implicitly to regular physicians for the cure of their maladies, and are systematically and remorselessly sent off to their long home. This is regular medicine.

Legitimate medicine is simply the privilege under the cover of law to commit such heroic deeds. It is the legal authority under the sanction of a diploma to commit medical barbarities on poor human nature that would make common villains tremble. It is the privilege to experiment with poisons, not on themselves, but, what is far easier, on the sick and infirm who come to them with

the delusive hope of being cured, and to experiment until the subjects of the experiments sink beneath the load.

We are quite sure that the people, becoming more and more averse to regular and legitimate medicines, are earnestly desiring some better mode, and are fast ascertaining where to find it.

ARTICLE VI.

An essay on Asiatic Cholera. By O. E. Newton, M. D. Read at the Annual Meeting of the Eclectic Medical Society of New York, June 12, 1867.

I offer a brief essay on the subject of Cholera, giving, to some extent, the peculiar characteristics of the disease, especially as it appeared in the year 1866, in Cincinnati, with some account of its progress. It will also present such practical hints as I am able to offer in regard to the prevention of the disease, and its general management and cure.

The disease named is one which physicians in all countries have been forced to acknowledge, in view of its danger and peculiarities, as one of the very first importance—a malady requiring the most prompt measures, not only in the way of guarding against its advent, but also in its treatment. I shall pass by its general history, with which, indeed, the Society is supposed to be already familiar.

In the United States, as in the more westerly portions of the Eastern hemisphere, Cholera has made its appearance in three successive periods; those, namely, of the years 1832–'33, 1849–'50, and (thus far) 1866—a fact which appears to show a period of return corresponding to *seventeen years*, and which, further, if the disease have for its law a continuation through two consecutive years, leads us to anticipate its prevalence also in the summer of 1867.

I am informed by the reports, having no personal experience of the malady, that the course and ravages of cholera in 1832–'33, were very alarming, the attacks being generally fatal. In 1849, I became acquainted with the complaint by constant practical observation. Although, for about a month preceding the 13th day of May in that year, there had been in Cincinnati reports of death by or attacks of cholera, yet it was not until the day named, and on which some *thirteen cases* were reported, that the disease was recognized as being among us to such an extent as to imply danger, and to properly constitute an epidemic.

I had at that time just graduated from the Eclectic Medical Institute of Cincinnati, and was in readiness to enter upon the duties of my profession, in accordance—as I hope—with the spirit

of the education I had received. No sanitary measures had been, up to this time, used by our city authorities for the prevention of the disease; the weather was very hot; and the population had in no way been educated as to the means to be adopted, as regards diet, etc., with a view to preventing attacks of cholera, or as to the things generally to be sought or avoided, in order to escape its dangers. As would naturally be expected, the disease made the most rapid progress, being permitted to extend its ravages not only through the influence of the active causes, but also—a point often of even greater importance—through the neglect of proper precautionary measures.

I had made myself to some extent acquainted with the disease through the standard authorities, and by means of pamphlet articles on the subject; and I commenced my practical familiarity with it in the usual way of visiting as many patients as my time would allow. My patients were generally those who had been accustomed to the attendance of other physicians, whose services could not now be obtained, so that I was ordinarily called after much delay. As a natural consequence, my cholera patients during this season were, as a general thing, already far advanced in the disease when I first saw them—perhaps had passed through the first and second stages; and, possibly, were vomiting, purging and cramping. Moreover, many of these patients had, up to such time, done, with a view to relief, only what was injurious, so that, owing further to the general fact of exposures on the part of the patients, or to mistakes of nurses, if by chance they had such, I may safely say that fully one-half of all I visited were, when first seen by me, already in a collapsed state. In fact, a general panic prevailed; and I cannot say that I should claim much for the results of my practice during the epidemic in question. Though I prescribed to the best of my ability, I still found that, generally, my remedies were wholly inadequate.

I copy the following from a paper on cholera, by Edwin Freeman, M. D., professor of anatomy in the Eclectic Medical college of the city of New York, and published in the "American Eclectic Medical Review" of New York, June 1866, with which I fully agree:

"SYMPTOMS.—Among the premonitory symptoms of cholera there is one that is seldom absent, and that is, a feeling of depression and weariness, indicating that the poison has begun to affect the nervous system. A slight diarrhœa generally sets in, and

there is often a sensation of nausea and uneasiness not amounting to pain—in the stomach and bowels—sometimes extending over the whole body. As the poison affects the nervous system more positively, cramps or clonic spasms of the muscles occur, from deficient supply of nervous force, and then the active stages of cholera set in with profuse discharges like rice-water from the stomach and bowels, and powerful crampings of the whole body. The pulse becomes feeble and then hardly perceptible; the skin blue, shrivelled and cold; the breath cold, and the countenance pinched and anxious. The patient becomes indifferent to all around, the discharges cease, the cramps are, if possible, worse than before; the collapsed stage is fully developed, and if relief be not speedily obtained the patient soon dies.

"Pathology.—The poison of cholera is undoubtedly in the atmosphere, and is received into the blood through the air we breathe. Its first, direct and most powerful impression is upon the ganglionic nervous system, greatly depressing all its functions. It also affects in some degree the cerebro-spinal system of nerves, and the tissues everywhere. It reproduces itself within the blood, and has a natural tendency to the free surface of the mucous membrane of the alimentary canal, whence it escapes with the profuse discharges set up there. When it thus escapes, there is a better chance for recovery than when there is no vomiting and purging. In these latter cases, which are comparatively rare, the patients nearly always die. The distribution of the branches of the different plexuses of the sympathetic nerve within the body is to the mucous membrane and to the muscular tissue of the walls of the small branches of the arteries which they accompany. A tonic contraction of those vessels is necessary to a perfect circulation through the capillaries, and to move the column of blood onward to the heart. In cholera this force is weakened, because the nervous center is poisoned; hence a passive congestion of the capillaries ensues, and a stagnant condition of the blood in the large veins beyond, in which at last nearly all the blood in the body becomes accumulated. To relieve the congestion in the walls of the alimentary canal, the blood serum leaks through the weakened capillaries and is thrown off in great quantities, carrying with it much of the poison. The fluid of all the tissues is absorbed into the blood to lessen its density, and, in its turn, escapes in the same manner, leaving the blood, as observed after

death, thick, black and tarry. The latter condition is owing to the retained carbonic acid gas and the secretions of the liver, kidneys, &c., and the want of oxidation. The walls of the air-cells of the lungs lose their tonic condition, and cease to be a proper medium for the interchange of carbonic acid for oxygen gas—hence a venous condition of all the blood—an absence of its bright arterial hue, and a resulting coldness, blueness, and shrivelled condition of the surface. Under such conditions, and a weakened action of the small branches of the pulmonary arteries, the circulation in the lungs is greatly retarded, and the left side of the heart draws all the blood from the pulmonary veins to supply the empty arteries in the general circulation. *Post-mortem* examinations develop that all those vessels and the left side of the heart are empty."

"This is the pathology on which the eclectic treatment of this terrible disease is based, and all the symptoms and conditions can be explained by it. That it is true seems evident from the unprecedented and astonishing success of the physicians of that system of practice in Cincinnati, during the fearful cholera epidemic of 1849. Their report, as published in "The Eclectic Medical Journal" of that city for that year, show an average rate of cure of 95½ per cent., in private practice, while in the cholera hospital under their exclusive care, where many patients were brought in a dying condition, the average rate of cure was 75¾ per cent."

"There is, then, firstly and primarily, a partial suspension of the functions of the nervous system of organic life, from the action of the poison. and, secondly, internal congestion, with coldness of the surface, great loss of the fluids of the body, and cramps of the muscles as a resultant. This is to be relieved by applying artificial heat and the use of diffusible stimulants—more or less powerful, according to the stage of the disease—which relieve by powerfully exciting the ganglionic nervous centre, and through it the arterial circulation. The capillary congestion is relieved, the discharges cease, and all the parts gradually resume their normal functions. The progress of the disease is so rapid that every family should have the means of relief at hand in the house, so as to apply them, and not wait for their physician, who may be detained elsewhere or not be found. The premonitory symptoms must not be neglected, but the person should immediately lie down, and maintain the recumbent posture until entirely relieved, so as not to make any demand on the nervous energies."

"In the cholera season, fatigue, large draughts of cold water, and exposure to unusual conditions should be avoided. All the matter vomited or purged should be received into a vessel containing chloride of lime or wood charcoal pulverized, or a solution of sulphate of zinc, or caustic soda, &c., to destroy the poison, which, if it escapes into the atmosphere, assists materially in increasing the intensity and virulence of the epidemic. If it should be thrown on the floor or clothing they should be carefully cleaned. No basin should be emptied in the open air, in the gutters of the streets, or on the ground, as is often done by the poorer classes in the crowded and filthy quarters of a city."

The disease being so rapid in its course, a great practical evil was that the *application* of the treatment ordered was commonly too tardy, the medicines being procured only in time to be a stage behind the disease. If I found the patient vomiting, my prescriptions were made accordingly; and then, perhaps, after much delay in waiting at a drug store for the medicines, when they came, the patient would be sinking rapidly from diarrhœa. Reaching the patient again, a similar delay was likely to occur in obtaining the remedies the diarrhœa made necessary. And when I was summoned once more, it would be perhaps to find that the medicines had only arrived when the patient was already cramping and rapidly growing cold, or passing into a hopeless collapse. Stimulants and antispasmodics would now be obtained, but often too late, because death was about to close the scene!

Under such disadvantages physicians generally, so far as my knowledge extended, treated cholera in 1849. Until the change of seasons or other natural causes operated to put a stop to its ravages, the disease had increased in mortality, so that at its height, the deaths among a population of about seventy-five thousand, were nearly two hundred a day.

At the close of the warm season, when the disease had passed away, I became further assured that in very many cases in which even the most respectable and wealthy citizens had died, and often in the hands of the most experienced practitioners—men, perhaps, who had been their family physicians for a quarter of a century or more—the fatal termination was really to be traced to the evil I have above pointed out, to wit: there being no remedies on hand in season to treat the particular stage of the disease as presented. My reflections on this point, as well as on the frightful mortality arising through other incidental causes, impressed me

with the conviction that in cholera, so far as its management is concerned, *the first great danger is in delay.* And I concluded that if the disease made its appearance again, I would advise all others to do what, during the year, I had not been able to recommend owing to a want of acquaintance as yet with the profession of the place—to adopt, in fact, a plan which ought to be put in practice by all physicians having the care of families, throughout the country as well as in the city.

I would recommend:

First, That each physician should thoroughly educate or inform his patients as to the best known means for the prevention of cholera and choleraic disorders.

Secondly, That he should also instruct them in regard to the most practical and ready means of treatment, supplying them with such when desired, to be kept always on hand and ready for immediate use.

It is in the carrying out of such a plan, that the hopes of every physician's patrons for immunity from this formidable disease should, in an important degree, find their dependence.

In the first place, then, it is desirable to adopt such hygienic rules as will serve, as far as possible, to prevent the occurrence of cholera.

As regards diet, all should not be put upon the same regulations, but each should adopt such a course of diet as will tend to permit and decidedly to favor a healthy assimilative action. Such food should be eaten as is likely to come within the capacity of the stomach to digest readily; in other words, such as tends to secure a healthy digestion. I may here remark that the majority of persons, while exposed to the epidemic influence of cholera, are liable to be troubled more or less with *indigestion*, and a partial arrest of the assimilative functions. It was last year (1866) a subject of general remark, among the patients of all physicians as well as with the physicians themselves, that there was a considerable portion of the community who were afflicted with a sameness of symptoms, these being as follows: Tongue slightly coated; a want of appetite; an engorged or bloated feeling of all the digestive and abdominal organs; evacuations rather costive, and deficient in quantity; with some pain in the bowels.

The treatment for this condition of system consisted in a mild antibilious course, continued for about three or four days; when, usually, the tongue became relieved of its coating, the bowels were

relaxed, the unpleasant fullness had passed away, and a natural appetite returned. For the symptoms named I commonly gave the following mixture, with some variation at times, as the case seemed to require:

℞.	Misturæ Cajuputi Compositæ,	
	Tincturæ Opii Camphoratæ, (of each),	f dms. iij,
	Extracti Fluidi Taraxaci et Leptandriæ,	f dms. iv,
	Syrupi Rhei et Potassæ Compositi,	f oz. iss,
	Syrupi Rhei Palmati,	f dms. ij,
	Tincturæ Seminis Anisi.	f dms. j.
M.		

Of this mixture two teaspoonfuls should be given every three hours, in case of an adult, until the pain in the bowels has ceased, the tongue is clean, and the appetite has returned. If there was some nausea, I added to the above a little peppermint and spearmint water; or, if the patient was very nervous, a nervine preparation, either the fluid extract of valerian or scutellaria. Such a course, together with a light diet, was, as I have before said, generally successful in relieving the patient within three or four days.

I may just here remark, that any attempt to force upon persons in the condition now considered a full diet, would invariably produce an increased derangement of the alimentary canal, owing to an inability of the digestive organs properly to act on and dispose of such food. In all these cases, in fact, I found it the best course to insist on the most rigid diet. For those, on the other hand, who felt generally very well, with good digestive power, I recommended the continuation in the main of previous dietetic habits, involving, as these commonly did, a mixture of vegetable and animal food. But I would add here my usual direction, that the most wholesome food even should be used only in moderate quantities; while, in regard to the use of vegetables, I particularly enjoined that these should be the choicest and *most fresh;* and as to meats, that only such should be used as were prepared with the greatest care. My conclusions as to the importance of these requirements, arrived at through observations made in the years 1849–'50, were confirmed by those of 1866.

As regards the use of stimulating beverages, I cannot too strongly recommend to all temperate persons the continuance, in a cholera season, of their previous habits; while those who had before been in the habit of using stimulants somewhat freely, will generally do well to continue, for the time, their employment, using, however, only such as are of greatest age, and the purest, and even these in

very small quantities. Many moderate drinkers, when the cholera made its appearance, drank in excess, believing that by the free use of stimulants they could prevent an attack; but such, when taken with the disease, were the most sure to die, there being then, apparently, no *resistive* capacity in the system, by which to maintain itself against so terrible a disease.

But further; I would not forget to call attention to the general use of water, internally and externally. The surface of the body should be kept perfectly clean, in order that the skin—the principal outlet of the system — should be, by no means, obstructed. For this purpose, a sponge-bath of tepid water may be taken every night and morning, followed by free application of the dry towel, or the flesh brush.

As to the use of water internally, I would suggest that it should always be used cold, and in the form of ice-water, where ice can be had, particularly in the cities; and that ice-water be always kept in such quantities, and in such position, where practicable, as to enable all to use it often, though not in large quantities at a time. Persons drinking sufficiently often of pure, cold water, are not so liable to become intensely thirsty from want of water in the system, and they are, accordingly, not so likely to chill the stomach, or to derange the digestive organs generally, by drinking an undue quantity at once. In manufactories, business houses, and all other places where a large number of persons are employed, a supply of water should be kept, cooled with ice to an even temperature, and near at hand, so that all may have ready access to it. So, when convenient, persons who are traveling should always carry ice with them, so that, as it melts, or is wanted, it can be drank in small quantities. I am fully convinced that, by use of means such as these, a great number of cases of cholera that are produced by drinking large quantities of water, could be prevented.

For myself, when I was ready to leave my office, my driver had always a small tin bucket filled with ice, placed ready under the buggy seat, and of the water melting from this I drank often, so that I never became very thirsty, and consequently drank but little at a time. So, in my office, I required the "water cooler" to be kept well supplied with ice. I feel that these apparently trifling means cannot be too strongly urged upon those who are willing to do all that is calculated to favor the maintenance of health, and to protect themselves against cholera, when prevailing.

Exercise, also, should at such times be attended to, but by no means taken in excess. Fresh air is a matter of great importance. If the epidemic shall again arrive in this country, those who have the means of leaving the cities, and who may desire to leave for a rural and healthy situation, should, if possible, do so before the disease makes its appearance in their particular district. In case of persons being exposed to cholera atmosphere, it often becomes a question whether they will not be running a greater risk in going abroad than in remaining at home. Many persons have been suddenly stricken down with the disease in their flight; and, in my opinion, the chances would be nearly equal in the two cases.

Apartments to be used in cholera seasons in a city, should be selected with a view to the possibility of securing prompt attention in case of an attack; and no one should—as in cities single gentlemen are very likely to do—occupy rooms entirely away from others. Nor should there, by any means, be too many congregated within a limited space. In the year 1849, buildings that accommodated a great many tenants, were badly scourged; and, in some of them, half of the entire number died. The same fact was verified and painfully illustrated during the prevalence of cholera in Cincinnati, in 1866. And I am fully satisfied that, in seasons of the epidemic, the collecting, in close proximity, of any large number of individuals, always results in predisposing them to the disease; so that, if possible, such crowding together should, in all cases, be avoided.

Having thus briefly passed in review what to me appeared to be the practicable means of preventing the disease, I now wish to occupy the attention of the Society, though quite as briefly, with some notice of what my experience and observation indicated as the most successful measures for its cure. As I intimated in the beginning of my article, in regard to the treatment of cholera, *the great danger is in delay.* And I propose, in accordance with this view, to give what is my dependence against a disease so malignant in its attack, so rapid in its progress, and, ordinarily, so fatal in its result.

The disease was almost invariably met with in one of *four stages*, viz.: either in that of diarrhœa, of vomiting, of cramping, or of sinking—that is, a state of collapse. In my early experience with cholera, in 1849, I had no means of choosing the stage in which I was first to see my patients, and no opportunity of

recommending any particular course for the prevention of the malady. In 1850, however, I adopted, and in that year and 1866, carried out generally, one uniform course of preventive and remedial means. That is, I desired that my patrons should become familiar with the symptoms of the first stages of the disease, and with the most practical remedy, and other measures for its prevention; and, that they should also have on hand, in readiness, with full written directions for use, medicines appropriate to the four stages already referred to, my prescriptions for those stages being as follows:

For the DIARRHŒA:

℞.	Tincturæ Camphoræ,	f dms. ix.
	Tincturæ Capsici,	
	Syrupi Simplicis, (of each)	f dms. iij.
	Tincturæ Lavandulæ Compositæ,	
	Tincturæ Opii,	
	Bourbon Whiskey, (of each)	f dms. vj.
M.		

Of this mixture, one teaspoonful is to be given every half hour to an hour, as the violence of the diarrhœa may require; the medicine to be taken in a little water, and continued until the diarrhœa is checked. In some cases, however, in place of the liquid, I gave a pill of the following:

℞.	Pulvis Camphoræ,	
	Pulvis Opii, (of each)	grs. xx.
	Pulvis Kino,	
	Pulvis Catechu, (of each)	grs. xl.
	Geranii,	grs. xxx.
M.		

Make into three and a half grain pills. Give one pill every half hour to an hour, or two hours, as the urgency of the diarrhœa may require.

For the VOMITING:

℞.	Aquæ Menthæ Piperitæ,	
	Aquæ Menthæ Virdis,	
	Aquæ Camphoræ, (of each)	f oz. j.
	Tincturæ Opii Camphoratæ,	f dms. iij.
M.		

To check vomiting, one teaspoonful may be given every five minutes; and in case of slight nausea only, the same dose once

in fifteen minutes. If the patient be quite sick at the stomach, but with no vomiting, a teaspoonful may be given every ten minutes.

For the stage of Cramping or of Sinking:

R. Misturæ Cajuputi Compositæ,
Pure pale Brandy, (of each) oz. j.
M.

Give one teaspoonful of this mixture in two teaspoonfuls of brandy, and adding two tablespoonfuls of water—the dose to be repeated every fifteen minutes, until relief is obtained.

The preparations now described, together with four ounces of the best brandy and two ounces of powdered mustard, and the whole accompanied with an article I had prepared on the subject of cholera, containing full directions for their use, formed a package with which nearly four hundred of my regular patients supplied themselves. The practical directions of the article referred to were substantially to the effect that when the very first symptom of either stage of the disease made its appearance, the patient was as soon as possible to occupy a recumbent position, to cover up warmly, to apply warm applications, such as hot bricks or flat-irons, or bottles or a jug filled with warm water, to the feet, and a mustard plaster over the gastric and abdominal region; after the mustard had irritated the surface, it was to be placed on the spine; and in the meantime, the medicine was to be taken as ordered for the special stage of the disease present.

Many of my patrons, when attacked with cholera symptoms, would send for me, but as a general thing they had so successfully used the medicines themselves that by the time I reached them they were so much relieved as to require from me only general directions.

If, however, I found the diarrhœa very bad, I generally used in addition to the other treatment for that form of the disease, an enema, which was composed as follows:

R. Mucilaginis Gummi Acaciæ, (thick) f oz. vij.
Acidi Tannici, dms. ij.
Amyli Pulv. dms. iv.
Tincturæ Opii, f dms. iv.
M.

Let about one-fourth the quantity so formed be used after each free evacuation.

If I found much tendency to coldness in the region of the stomach, I ordered hop poultices, to follow the use of mustard; the application to be made over the stomach, and to the spine posterior to the gastric region. If much thirst existed, cold tea was allowed as a drink, as well as pieces of ice to be taken into the mouth frequently.

The patient, when recovering, should be kept on a very light diet, such as is found in *beef tea, broths, tea and toasted bread, baked potatoes*, etc.; and he should by no means be in haste to resume active business. Indeed, a remarkable feature of cholera is the great debility that follows as well as accompanies it.

In the treatment of the disease, the most constant attention should be given to maintaining an equilibrium of the circulation, and preventing congestion of the spinal cord; as any interference with the healthy action of the nerves with which the circulatory system is supplied, or with the nervous energy required to keep up a normal capacity of the blood vessels to receive and transmit the vital fluid, would, and certainly does, *produce or encourage the serous effusion which results in the stage called collapse.*

As a proper sequel to this essay, and a means of showing at a glance the results of the system of treatment used by me in cholera, and under my direction by my patients, I append herewith a report, which is a duplicate of the one furnished by me to the board of health of Cincinnati. In it is given a list of the cases treated by me in the year 1866, from the time the disease was recognized as an epidemic, until the last of August, when by the board of health it ceased to be so regarded. In the meantime the spread of the disease had increased up to the 24th of the month named, when the highest number of deaths reported as occurring in one day—namely, 86—was reached. From that date, the disease began to decline rapidly, until the last of the month, as already mentioned. There were, however, a few evident cases of cholera occurring during the month of September and a part of October. The exact number of cases and deaths has never been officially made public.

From a lecture lately delivered in Cincinnati by the Rev. A. D. Mayo, and reported in the *Commercial*, of March 25, 1867, I copy the following passage:

"The population of Cincinnati last year within municipal limits was probably 210,000, of which 6,000—*one in thirty-five of us all*

—were removed by death. Of this number, at least 2,000 persons died of cholera. Not less than 4,500 cases of cholera were reported to the board of health, of which nearly half were fatal. It is estimated that twenty per cent. of those who recovered were left with permanently impaired health. Two-thirds of those who died were able-bodied men and women." I am led to suppose that these numbers were privately obtained by Mr. Mayo from the health board.

The cases given in the accompanying report, treated by me, with a few scattering ones attended before the disease was reported as epidemic, amount in all to *one hundred and seventeen*, out of which number there were *only three deaths*. Of these, two were German women, who were far advanced in the complaint when I saw them. One of these died within two hours from the time when I first saw her, at which time she was already in the stage of collapse. The second, after I had checked her cramping and diarrhœa, and had got her warm, was neglected by the nurse, who fell asleep, and allowed her to get out of bed upon the cold bare floor; after this, the patient at once sank again into a collapsed state. The third death was that of an American lady, then recently from Chicago, who had brought with her some favorite prescription which she had persistently used, though each dose had vomited her freely, until, when I was called, she was almost pulseless. Owing to the excessive local irritation established in the stomach by the large doses of this *cayenne* mixture which she had been taking, I was unable to control the spasmodic action induced in that organ.

Besides these, there was only one fatal case among those who had possessed and used the means I have already referred to, to be kept on hand for employment in case of the disease. The person was a German lady, who had eaten a large quantity of cheese for supper, after having had some looseness of the bowels the previous day, and had then set up all night with a sick child. She was taken at 5 A. M., had one evacuation, and became pulseless and cold. Owing to my being out when sent for, I did not see her until half-past 8 A. M.; she was then speechless, and died before eleven o'clock. I lost also two cases in September, after the disease had ceased to be considered epidemic, and when reports to the Board of Health were no longer required; but neither of these cases came strictly under a systematic course of treatment.

Such was my success in the treatment of cholera in the year 1866. In 1850, the second year of my practice, I furnished to the already considerable number of persons with whom I had become connected as family physician, about the same set of means for use, and with the same general directions, as those which I again gave out in 1866; and among the families so supplied, I did not in the former year lose one patient.

The foregoing forms a striking contrast in results, to the ordinary success attending the usual course of waiting until an attack of cholera has set in before consulting a physician, where the fatality has reached very nearly 40 or 50 per cent. In fact I have lately been informed by one of the reporters of the daily press, that having understood that all physicians in Cincinnati had been required the previous year to report to the board of health all cases of cholera treated by them, with the number of those cured and the number of deaths, and believing that such a report was public property, and that he had a right to a copy of it, as such, for publication, when he made application for the same with a view to such purpose, *he was peremptorily denied that privilege.* When he stated that his object in the proposed publication was simply to show to the public the number of cases of cholera treated in the city in 1866, by whom, and the number that recovered, he was answered by the allopathic President of the Board of Health that he (the reporter) could safely say that *fifty per cent* of the persons attacked with cholera died!

Indeed, I am led to believe that it was such reports as that accompanying this essay, and those made by other reform physicians, that *prevented the publication* of a general report for the city, and which it had been intended by the Board of Health to make public. The individual reports were even ordered for such purpose, peremptorily, that the board might be able to make a public report. Such a request was made of me on the 28th of August of the year in question, by a note from the president of the board. Though the reports generally are laid away or hidden, yet the public are becoming more enlightened, as they gradually come to be better acquainted with the facts, upon which to predicate a correct conclusion as to the comparative success of medical men of the different systems of practice. And while we, as eclectic physicians, have had thus to contend against such injustice, we should spare no pains to make an honorable exposé to the

public of all that we feel sure is accomplished by us, with a success superior to that of the allopathic practice.

Thanking the convention, in conclusion, for indulgence in the time it has allowed me to occupy in the reading of my essay, I close with a sincere wish that the greatest prosperity may attend and result from the present meeting.

CASES OF ASIATIC CHOLERA TREATED BY O. E. NEWTON, M. D.

NAME AND OCCUPATION.	Age.	Nativity.	Place of Residence.	Degrees or stage of the disease.	Date of their commencement, 1866.	Date and mode of termination. 1866.
	Years.					Discharged cured—
Louisa Gibson	14	American	19 E. 7th st	Vomiting and severe diarrhœa	August 21	August 21
Ann Myers	30	American	E. 6th st	Diarrhœa, cramping, vomiting and severe tendency to collapse	August 23	August 24
R. Johnson, book-keeper	21	American	349 W. 8th st	Diarrhœa very severe	August 10	August 17
Mr. Mitchell, grocer	30	American	98 Elm st	Diarrhœa	August 16	August 17
D. C. King, fur manufacturer	44	American	443 W. 8th st	Diarrhœa, cramping and vomiting	July 29	August 4
J. W. Reidnour, president railroad Co.	48	American	College Corner	Vomiting, cramping and purging	July 26	July 29
Allen Collier, merchant	45	American	Walnut Hills	Diarrhœa and vomiting	July 29	August 1
J. Holland's child	6	American	Pleasant street	Diarrhœa	July 27	July 20
Joseph Adams, clerk	37	American	562 W. 9th st	Vomiting and purging	July 22	July 22
Mrs. Rodan's child	8	American	246 E. 6th st	Vomiting, diarrhœa and cramping	July 6	July 7
John Rockel's child	6	American	19 14th st	Vomiting, diarrhœa and cramping	July 13	July 14
Miss Norman	36	Irish	Newport, Ky	Diarrhœa and vomiting	July 16	July 19
Mrs. Henry Kohne	25	German	366 Sycamore st	Severe diarrhœa	August 6	August 6
Lewis Cordes, dairyman	28	German	Walnut Hills	Diarrhœa, vomiting and purging	August 6	August 6
Mrs. Allen Cooper	36	American	84 Pleasant st	Vomiting, purging and cramping	July 31	August 1
R. Laws, horse-trader	30	American	149 Longworth st	Profuse diarrhœa	July 29	August 3
Henry Cordes, hired man	30	German	Walnut Hills	Violent diarrhœa	August 10	August 13
Mrs. Ayer, dressmaker	28	Irish	Elm ab. 9th, W. side,	Diarrhœa, vomiting and cramping	August 9	August 12
Mrs. J. Rosenbaum	35	German	247 Broadway	Diarrhœa and cramping	August 5	August 8
Rosenbaum's hired girl	18	German	247 Broadway	Vomiting and diarrhœa, arms and legs cold	August 5	August 8
Mrs. N. Morris	42	Italian	Vine and Gano	Diarrhœa and sinking	August 10	August 11
Mrs. John Thomas	28	American	132 Livingston st	Diarrhœa and vomiting	August 10	August 11
J. Loeb, trader	30	German	207 John st	Diarrhœa and cramping	August 10	August 11
Mrs. F. Finkle	28	German	25 Hamilton road	Violent diarrhœa, cramping and vomiting	August 14	August 17
J. H. Collins, messenger U. S. Ex. Co.	30	American	Western avenue	Severe diarrhœa	August 12	August 14
Mrs. S. Cummings	44	American	Newport, Ky	Violent diarrhœa, cramping, a strong tendency to collapse	August 13	August 16

Mr. Custard	28	American..	250 W. 5th st	Diarrhœa and vomiting, coldness of extremities	August 16...	August 17
G. H. Sturis	30	German ...	366 Sycamore st	Violent diarrhœa, with disposition to sinking	August 16...	August 17
Mrs. W. Hukill	17	American..	291 John st	Diarrhœa and sinking, hands and feet cold	August 16...	August 16
Henry Schneider	30	German ...	Cor. Lyle and Abigal,	Diarrhœa and sinking	August 17...	August 20
Henry Strenir	34	German....	Cor. Lyle and Abigal,	Violent diarrhœa	August 17...	August 21
Henry Goldsmith	25	German ...	Cor. Lyle and Abigal,	Diarrhœa and vomiting	August 17...	August 20
Mr. Whitcomb, A. & G. W. R. R	30	American..	Longworth st	Diarrhœa, with sinking spells	August 17...	August 22
Mrs. Shank	30	German ...	235 Briman	Asiatic cholera	August 16...	August 17
Obermyer's child	8	German ...	122 Abigal st	Vomiting, cramping and diarrhœa, and in a collapsed condition before relieved	August 18...	August 23
W. Vatchet's child	1	American..	130 York st	Violent diarrhœa	August 20...	August 18
Isaac Webb	17	American..	Penn and George	Severe diarrhœa	August 25...	August 23
Caroline Rouse	12	German ...	135 Everett st	Diarrhœa	August 4...	August 25
Willie Little	6	American.	132 Everett st	Diarrhœa and vomiting	August 6...	August 4
Charley Little	3	American..	132 Everett st	Severe diarrhœa	August 11...	August 7
A. Turner, driver	28	American..	144 Laurel st	Diarrhœa, cramping and vomiting	August 18...	August 12
Emma Woodworth	19	American..	136 Everett st	Severe vomiting	August 23...	August 23
R. L. Atkins, clerk	31	American..	42 Elizabeth st	Diarrhœa	August 19...	August 19
Mrs. R. L. Atkins	29	American..	42 Elizabeth st	Diarrhœa	August 22...	August 23
M. T. Sigur, Southern planter	60	French	242 Clark st	Malignant diarrhœa—frequent rice-water discharges	August 9...	August 11
J. Russ, candy manuf. 64 Walnut st	25	Scotch.....	30 Alison st	Diarrhœa	August 21...	August 24
D. Gallagher, carpenter	36	Irish	64 John st	Severe diarrhœa	August 12...	August 12
N. B. Wills	24	American..	W. 4th st	Cramping, vomiting, diarrhœa and coldness of the extremities	*Aug. 6.	
Molly Montgomery	24	American..	Linn & Livingston sts.	Cramping, vomiting and diarrhœa	August 7...	August 8
George Hukill, pilot	35	American..	132 W. 9th st	Vomiting, sinking, with coldness—strong tendency to collapse	August 8...	August 9
F. G. Fromeyer	28	German....	Walnut Hills	Severe diarrhœa	August 21...	August 22
Mrs. G. Frey	23	German....	Stow's Township	Cramping and diarrhœa	August 15...	August 16
Mrs. Staley	22	American..	York near Linn st	Cramping	August 23...	August 23
John Thomas	27	American..	132 Livingston st	Severe diarrhœa	August 17...	August 18
Rome Thomas	3	American..	132 Livingston st	Severe diarrhœa	August 17..	August 17
Carrie Mandary	17	German ...	132 Livingston st	Severe diarrhœa	August 18...	August 18
W. H. Cullam, I. & C. R. R	25	American..	Ruggles' House, 34 Plum st	Diarrhœa with rice-water discharges	August 21...	August 24
Chas. Parcill, clerk at Hall's safe factory	30	American..	34 Plum st	Malignant diarrhœa	August 14...	August 15

* Consultation.

Cases of Asiatic Cholera treated by O. E. Newton, M. D.—Continued.

NAME AND OCCUPATION.	Age.	Nativity.	Place of Residence.	Degrees or stage of the disease.	Date of their commencement, 1866.	Date and mode of termination. 1866.
	Years.					Discharged cured—
Mrs. Mary Fallen	73	Irish	N. W. cor. Hunt and Sycamore sts.	Diarrhœa commenced August 25th; applied to me August 27th; was vomiting and at same time had an operation every half hour	August 25	‡Aug. 28
J. E. Haynes, carpenter, Baker st.	40	Irish	5 Observatory road	Diarrhœa	August 6	August 6
Miss ——, sister-in-law to H. Cordes, dairyman	24	German	East Walnut Hills	Severe diarrhœa.		
W. B. Wells, Cincinnati Type Foundry	24	American	W. 4th st	Cramping, vomiting and diarrhœa	August 8	August 8
Thomas W. Kinsey	40	American	862 W. 9th st	Diarrhœa	August 18	August 20
R. G. Horn	20	American	59 Eighth st	Vomiting, diarrhœa, cramping and strong tendency to collapse	August 14	August 15
H'y Tracy, clerk at Kusey & London	20	Irish	123 W. Front st	Diarrhœa and cramping	August 23	August 23
J. J. Raipe	40	American	Newport, 140 Monmouth st	Cramping, cold to knees and elbows	August 20	August 20
Sarah A. Runnells	50	American	Newport	Diarrhœa	August 12	August 12
James Runnells	18	American	Newport	Diarrhœa and cramping	August 12	August 12
E. Runnells	22	American	Newport	Diarrhœa	August 12	August 12
William Runnells	20	American	Newport	Diarrhœa	August 12	August 12
Matthew Doyle, brewer	30	Irish	Abigal st	Diarrhœa and vomiting	August 15	August 15
Mrs. Campbell	25	Irish	Hunt and Sye sts.	Diarrhœa and vomiting	August 22	August 22
Mrs. J. E. Leslie	28	American	95 John st.	Severe diarrhœa	August 18	August 18
Mrs. M. D. Leslie	21	American	W. 9th st	Diarrhœa	August 20	August 20
Fannie Leslie	2	American	95 John st	Diarrhœa	August 20	August 20
Laura Atkins	4¼	American	42 Elizabeth st	Vomiting and diarrhœa	August 12	August 12
C. T. Adams	35	American	562 W. 9th st	Diarrhœa and cramping	July 27	July 29
Mrs. C. T. Adams	34	American	562 W. 9th st	Very severe diarrhœa and cramping	†July 23.	
Sally Adams	8	American	562 W. 9th st	Severe diarrhœa	July 29	July 30
Sarah Patterson	28	American	562 W. 9th st	Nausea and bad diarrhœa	August 16	August 18
S. D. Evans	27	American	48 Mill st	Cramping and coldness	August 10	August 11
Lozine De Gray	6	American	73 Pleasant st	Severe diarrhœa	August 20	August 20

Mrs. Henry Alexander	26	American..	Avondale	Cramping and severe diarrhœa	August 6...	August 6
J. F. Hurton	8	American..	713 Elm st.	Rapid diarrhœa, watery discharges.	August 16...	August 17
J. F. Hurton, second attack	8	American..	713 Elm st.	Severe diarrhœa	August 19...	August 19
J. D. Hurton	15	American..	713 Elm st.	Diarrhœa and vomiting	August 23...	August 23
J. W. Neff, student	24	American..	Clifton, Ohio	Diarrhœa and vomiting, cold hands and feet.	August 21...	August 25
Mary Mullackey	20	Scotch	Ruggles' House	Cramping in bowels and diarrhœa	August 22...	August 23
U. T. Wise	7	American..	94 Elm st.	Vomiting, purging and diarrhœa	August 20...	August 20
P. Smith	30	German	Clinton st.	Cramping and diarrhœa	August 11...	August 14
M. A. Kessler	27	American..	144 Livingston st	Diarrhœa with cramping in bowels.	August 19...	August 23
William Senour	39	American..	170 W. 4th st	Diarrhœa and cramping, very severe	August 7...	August 8
G. G. Wright	30	American..	77 George st.	Diarrhœa	August 15...	August 15
Frank Ewers	6¼	American..	415 Main st.	Malignant diarrhœa and cramping.	August 11...	August 11
M. Tennisson	36	American..	43 E. 7th st.	Vomiting and diarrhœa.	August 16...	August 19
William Tennisson	2	American..	43 E. 7th st.	Diarrhœa, cramping and vomiting, with tendency to collapse	August 17...	August 17
Emma Tennisson	6	American..	43 E. 7th st.	Diarrhœa and vomiting	August 8...	August 11
Mrs. M. Tennisson	33	American..	43 W. 7th st.	Severe diarrhœa.	August 12...	August 12
J. C. Mattoon's child	2	American..	W. side Kilgour, bet. 3d and Congress	Severe diarrhœa	August 14...	August 16
Charles Hallam's child	7*	American..	Newport.	Diarrhœa	August 18...	August 18
E. B. Merritt	15	American..	69 W. 9th st.	Malignant diarrhœa	August 15...	August 17
Mrs. Thomas H. Johnson	48	American..	349 W. 8th st	Diarrhœa and pains in bowels	August 15...	August 16
Mrs. W. G. Crippen	42	American..	341 Baymiller	Cramping, diarrhœa and a strong tendency to collapse	July 7...	July 8
Louisa Gilson	14	American..	17 E. 7th st.	Vomiting, severe diarrhœa, with watery discharges	August 21...	August 21
Anne Myers	30	American..	E. 6th, above Baum..	Diarrhœa, cramping and vomiting, with severe tendency to collapse	August 23...	August 24
Thomas H. Johnson's hired girl	28	American..	349 W. 8th st	Violent diarrhœa.	August 28.	
Jos. P. Mayers	47	German	Walnut Hills.	Violent diarrhœa.	August 27...	August 27
W. H. Bristol	40	American..	404 W. 3d st.	Violent diarrhœa and vomiting, with severe pains in bowels	July 27...	July 28

One hundred and seven cases tabulated; ten cases not included in the above table, making a total of one hundred and seventeen cases, with only three deaths.

* Months. † And diarrhœa lasted several days. ‡ Relieved.

ARTICLE VII.

Eclectic Medicine: The Lessons of its Past, and the Duties of its Future. The Annual Address at the Sixth Annual Meeting of the Eclectic Medical Society of the State of New York, delivered in the Assembly Chamber, Albany, January 15, 1868. By PAUL W. ALLEN, M. D., Professor of the Theory and Practice of Medicine in the Eclectic Medical College of the City of New York.

Gentlemen of the Eclectic Medical Society
of the State of New York:

Once more we are assembled, gathered from every section of the Empire State, to take counsel together upon the highest interests of our noble profession. We come together upon this Sixth Anniversary of the Society, under circumstances of peculiar prosperity and encouragement, to exchange the courtesies of a generous fraternity, to encourage each other in the rightful discharge of duties, to learn some new facts which may be useful to us in the discharge of our vocation as physicians and surgeons, and to consult generally upon the interests of the members of the profession to each other, and to that public to which our life-long services are devoted.

We propose to speak to you, in the hour of this anniversary allotted to us, on ECLECTIC MEDICINE: THE LESSONS OF ITS PAST, AND THE DUTIES OF ITS FUTURE.

Among all the diversified duties of human labor, no employment can be more responsible than that of the physician. To us is entrusted, in good faith and without reserve, the care of that member of the household upon whom has come the suffering, the anxiety, and the peril of disease. To us all look for relief, for safety, and for life.

"He was our old family doctor." Thousands have repeated these words, and the words thus spoken have brought up afresh many memories of tender trusts, of hours of danger and doubt, of returned health and reason, and of the mingling again of the sick mother, father, brother, sister, or dear little one, in the enjoyments of healthful life, and restored activity and happiness. A

grateful testimony do we often hear, as we go into the villages of our early homes, to the skill, and kindness, and faithfulness of that "old family doctor." And if he were faithful and true; if he were daily industrious to know all that belonged to his profession, and did serve his generation well and truly, and above the dictates of an inordinate selfishness, who is entitled to more honor? Who deserves a better remembrance?

Let us aspire to be honorably remembered; yes, more, to be respected and beloved while we live. Most frequently, indeed, the physician is not the man of large wealth; for he is brought so constantly in contact with the necessities and afflictions of others, that he gives a large share of his manly heart and educated brain to others. In the busy, earnest cares of his daily life, he has not time even to think of mining stocks and bank shares, or of investments in mercantile or manufacturing enterprises. The care of his patients, the study of his profession, the duties and endearments of home; these are his centres of interest and of hope; and if, beyond these, and his country and his God, he dare have anything else to love, we must declare that, according to our acquaintance with many a physician, it is that pet, favorite horse who has borne him so faithfully for many a weary mile, in sunshine and in storm, and whose every motion is just right in his eyes.

We are willing to give to others the fame of the forum, of the pulpit, of the press; and others may strive for the politician's office and honor and perquisites; for the graceful and grateful reputation of the man of letters, or of the artist; for the merchant's wealth, the warrior's glory; or for the inventor's reputation, or the world-wide name of him who spans the ocean with telegraph wire; or those who dart across the mighty width of the Atlantic with the swift wings of the Henrietta, the Vesta, and the Fleetwing! We grant to all these the various fames, honors, and emoluments which they may rightly claim, while we claim for ourselves only the respect due to the skillful, faithful, and beloved physician. Our care is the care to bring back lost health; and the poet well says:

> "Nor love, nor honor, wealth, nor power,
> "Can give the heart a cheerful hour,
> "When health is lost."

And Cicero, the orator of orators, well says: "In nothing do men so nearly approach to the gods as in giving health to men."

Gentlemen: We appreciate our high mission; and in the hour before us let us direct our thoughts to a consideration of some of the methods by which we may make our profession, and ourselves as members of that profession, still more useful. We would do our duties better than ever; we would be more worthy of confidence, and esteem and honor. How may we be thus worthy? How may we best attain more knowledge, more usefulness, more influence?

Here assembled is the Eclectic Medical Society of the State of New York—a brotherhood of Physicians who, many of them, twenty years ago, honestly came to the conclusion, from observation, study and reasoning, that the commonly received system of medicine, denominated allopathy, was not the best system; that far more efficient remedies for the cure of the sick than those used by that practice had been discovered; that bloodletting was the letting out of life; that the giving of mercury was the giving of a most deleterious poison; that the exhibition of antimony was a wasteful depression of vital power; that the giving of such powerful and irritating purgatives, day after day, in fevers and inflammations, as would kill a well man, would surely kill a sick one; that to opiate a man, or a child, hour after hour, was to hide the real features of the disease, to make him weaker when he came out from that stupefaction, and perhaps to fasten upon the brain some disease induced by the well known tendency of opium to produce congestion of that organ; that almost this whole system of depletion, and stupefaction, and poisoning, was unscientific in theory, utterly opposed to the hygienic laws of the system, and dreadfully fatal to the sick.

Many of us were educated in this self same system of allopathy, and we were slow to question its teachings; slow to doubt its practice at the bedside. The centuries past had contributed to make this system. Wise men of many ages, and all their teachings as to inflammation and fevers and the nature and symptoms of the various diseases, had educated our brains, and our hearts too, to have confidence in its doctrines and remedies. We asked ourselves, as we saw the failures of this system in typhoid and other fevers, in rheumatic and other inflammations, in dysentery, in cholera, in scarletina, and in many other diseases, both acute and chronic, if it could be that such men as Cullen and Hunter, and him whom we would call the Webster of British Medicine—Thomas Watson—were mistaken? If it could be that Velpeau and

Louis, of Paris, who seemed to carry to the ultimate the diagnosis of surgical and medical diseases, were yet unacquainted with the true theory of surgery and the true practice of medicine? If it could be that Warren, of Boston, and Hoosac, of New York, and Wood, of Philadelphia, did not know the best agents for the cure of disease? Our experience at the bedside, and the failures we saw made, led us to distrust them all, as to the remedies they employed; and when we came to study other remedies, and to test their power, we arrived at the inevitable conclusion, clear as noon-day, that these fathers in medicine had been mistaken, and we had been mistaken; and that we had studied a system which was not a system of true science; that it was unsound in theory and destructive to life in practice. We proved this, and great was our satisfaction to receive a better practice; and so we propose further to speak of

Eclectic Medicine, the Lessons of its Past, and the Duties of its Future.

First of all, let me congratulate you on the present *status* of the American Eclectic System of Medicine. That a new system of medicine should, in less than thirty years, have attained such a prominence and influence, is in itself, the highest evidence of its efficacy. For hundreds of years previous to 1835, it could scarcely be said that there was any intelligent opposition to allopathy. Indeed that system was unquestioned. It was not only *the* system, but it was the *only* system. Samuel Thomson had announced the great practical truths that we must sustain the vital powers; that stimulants and not depletion is the true theory of medicine; that fever is a protest of wrong in the system, and that we must help fever to eliminate disease, by relaxation and stimulation. His great error was the rejection of all cathartics; and yet his sweating and stimulating processes, many times broke up fevers and arrested inflammations with magic power and rapidity. His doctrine of sustaining the vital powers is prevailing more and more, and brightening many pages of medical and surgical science. Late in life he said to a friend: "I have used some very unpleasant medicines, awfully unpleasant—cayenne and lobelia; but cayenne is the purest stimulant I know of, and lobelia the best relaxant I know of. I hope my successors will find pleasanter medicines, and I know they will; but the great doctrines of stimulating the vital powers and promoting the secretions, and thereby eliminating

disease can never die! Calomel and bloodletting men will soon despise, but those principles will live forever." Who will not say that Dr. Thomson was right, and that these principles will live forever! He established these doctrines, and he was the first successful innovator upon allopathy. If he were exclusive and did use too few remedies, he was wonderfully successful in many diseases; if he abjured all cathartic medicines, his opponents erred ten times as much by their abuse; if he were bigoted, we must remember that he was persecuted and imprisoned without mercy, by those who to-day would be far wiser had they been taught at his feet.

"Seven cities of Greece claimed Homer dead,
"Through which the living Homer begged his bread."

As Horace Greeley well said, in his speech at the recent commencement of the Eclectic Medical College of the city of New York—"The very stones with which martyrs are stoned in one generation, are used in the next to build them an eternal monument.

We have still living in New York, another great reformer in medicine, Dr. WOOSTER BEACH. He has published more works than almost any reformer; and these exerted wide-spread influence throughout the country. He brought to the notice and use of the profession quite a number of very valuable indigenous remedies; he introduced a new treatment for cholera, and dysentery, and scrofula; and he gave us numerous and excellent formulæ. For these reasons, and because he was a liberal gatherer of medical truth from every source, he is entitled, more than any other man, to the title of the *Father of Eclectic Medicine.*

The lamented T. V. MORROW, the father of Eclectic surgery—the teacher and author—was his student, and established this system in the mighty West. The large classes that now annually graduate from the Eclectic Medical Institute of Cincinnati, were commenced by him. We are told that at the first session there were six professors, giving six lessons daily of one hour each, to *one student.* How has the little one become a thousand!

Our early physicians were, some of them, converts from the prevailing system; whilst others obtained their knowledge of practical medicine by attendance upon our schools, and by reading the works just alluded to. They had brought against them the organized opposition of the so-called regular profession throughout the country; and the power of the press and the law, and all the

prestige of medical authority was sought against them. But the fact that they soon established colleges in Cincinnati, Worcester, Rochester, Petersburg, Macon and Philadelphia is evidence that our system had extensively secured the common sense convictions of the American people in its favor.

But in any reform, its friends are at first wanting in organization. In fact, until within the last eight years, there was no legal State Society of Eclectic Physicians. Under such circumstances, it is no wonder that some of these collegiate enterprises failed. But we have now colleges in Ohio, Pennsylvania and New York, and we have State societies, mostly incorporated by legislative enactment, in Maine, Vermont, Massachusetts, Connecticut, New York, Pennsylvania, Ohio, West Virginia, Indiana, Michigan and Illinois; and movements for the formation of other State societies are under such auspicious management and progress as to promise, within a very few years, an intelligent and powerful society in every State of the American Union.

We now have well sustained monthly journals devoted to eclectic medicine, in Cincinnati and Philadelphia, and the *American Eclectic Medical Review*, published in New York, is believed to be increasing in circulation more rapidly than any journal yet issued. The contributions to these journals are generally of a very creditable character, both as to their literary style and as to their practical usefulness. It is very encouraging to know that the recent attempts, as in Vermont, to secure acts of incorporation for State societies, has met with but little opposition; and also to know that our journals are rapidly rising to a remunerative support. We know of no medical journal in France, Great Britain, or America which, in its typographical neatness, or in the excellence of its contents, excels the *American Eclectic Review.*

Other very encouraging signs of our progress are seen in the constant appearance of new works, devoted to the practical and daily duties of our profession, and in the increased popularity of our system of treatment everywhere. Few, indeed, who study our works ever return to allopathy, or adopt homœopathy. Occasionally, some one of our physicians, surrounded by peculiar influences, will be entirely silent as to his method of practice. This, as he thinks, serves his present interest; but converse with him about his remedies, and we find that he principally uses those discovered and developed by eclectics, and that he has in his study, a good array of those works on the materia medica which have

been issued during the last twenty years, by the authors of our school. Even here is a triumph for our remedies, because he proves them, adopts them, and trusts to them in the emergencies of disease, in preference to all other agents. This is, indeed, evidence of their inherent excellence, even in the hands of those who are so wanting in manliness that they choose to keep out of sight the very elements to which they owe their success. They are willing to silently get from eclecticism all they can, without giving any public credit to that system which has made them what they are. Perhaps they forget that such a course is a very doubtful illustration of human gratitude; perhaps they forget that those to whom they administer their remedies would be valuable and influential friends, and would extend the benefits and blessings of this system, if they only knew to what remedies they owed their own recovery. Such men forget that the system and society and humanity have claims upon them, entirely superior to any consideration of their own personal advantage. But there are but few such men. Eclectics generally, almost universally, are true to their principles, and ready at all times to give a reason, yea, many reasons, for the faith that is in them: and it is this positive faith, this outspoken frankness, this manifest desire to exert an aggressive influence against that which they conceive to be wrong, and in favor of that which they think is not only right, but a vast blessing to all humanity, that has given us our success, and will continue to. And eclectics are rapidly learning to unite, in every rational method, for promoting and extending their principles. In truth, it is wonderful that, unassociated and unorganized as our practitioners have been in past years, and scattered, and frequently with but few medical friends near them, their principles and practice are so uniform.

We have lost heretofore, wonderfully lost, in the extent of our public influence by our want of organizations. But each man, acting by and of himself, has developed his own individuality, and that individuality has, from the convictions of each investigator and observer, arrived at the same results as to the true doctrines of medical science and the remedies to be preferred.

We challenge the history of the world to produce the instance of so large a number of intelligent men coming to the same conclusions and adopting the same essential platform of belief without having been educated and disciplined by organization.

If such be this fact of the past, what is its encouraging lesson

to us? Once organize these thousands, and concentrate their energies and efforts, and we shall speedily establish the complete triumph of Eclecticism throughout this country and the world.

Reforms always go slow at first, but if true reforms they always go. Our country has not seen many reforms, for we are a youthful nation, and we have no one completed reform in all our history. Even that oldest, the temperance reform, started so long ago, does not seem quite perfected to any man who observes the various styles of walking in the streets of New York. But in England we can find many illustrations of true reforms; reforms in government which are not unlike our own present reform in medicine. Indeed the history of England, for a hundred years, has been a succession of them. Slowly the people were indoctrinated, and then the nation's heart warmed up in reference to the slave trade, and it must stop in 1806; in reference to the Catholic emancipation, and in less than thirty years it was accomplished, in 1829. Next came the reform bill of 1831, which, it will be remembered, enlarged the representation of the English country members of Parliament from 94 to 159, introduced uniformity in the qualification of voters, and extended the elective franchise from corporations for privileged bodies to the citizens at large—not all citizens indeed, but a far larger number than heretofore. To thus enlarge the elective franchise required years of discussion among the people, and when the crisis came it was a terrible blow to the power of the King and the aristocracy. The House of Lords declared this bill should never pass, and King William swore it should never receive his signature. The King and the Parliament both said that to pass the bill would be to acknowledge and enlarge the rights of the people and it must be resisted. But the mighty multitude of England, the people, were excited and determined, and, to use the words of another, "England was in peril, till one night, while the turbulent multitude were swaying to and fro without the house of Parliament, their shouts and murmurs now and then borne to the ears of the members, Macauley arose, and in a thrilling speech, thundered on his astonished adversaries the prophetic words, '*through* Parliament or *over* Parliament this bill will pass.'" It passed, and the throne of England stopped rocking on its base.

Gentlemen: I need not tell you that the throne of England is again rocking on its base. There is a public sentiment, in England and out of England, to-day, which imperatively demands the

granting of enlarged rights. This sentiment has not shaped itself into exact historic form, but it requires no large knowledge of history and of human nature to see that three things must be secured. First: The enjoyment of the elective franchise by every adult male in the United Kingdom of England, Scotland, and Ireland. Second: The abolition of a government church, and the equality before the law of all, whether Episcopalians, Dissenters or Catholics. Third: A system of universal public education. English statesmen are discerning these impending demands, and that they may not be forced to adopt them *too* quickly, by power outside and among her own people, they seem wonderfully willing, all at once, to consider the nature and extent of the Alabama claims. These claims will be paid, and these reforms will prevail, and their influence will go to make up a new chapter of the progressive history of the British Empire!

And just so it is with our medical reform in America to-day. The convictions of the people, whenever and wherever they have tried our system, are with us; and our organizations will ere long be so numerous and so perfected, and our means of influence so extensive in every state, that we may even now say, *through* allopathy, or *over* allopathy, this reform will pass. It will pass *over* it, in the hands of eclectics, if they are true to themselves. If not true to themselves, our remedies will be appropriated gradually by others, without any credit to us; and we decried as vile quacks; and American eclecticism be declared illegitimate medicine. But this cannot be. Our convictions are too established, our reasonings too well studied, our experience too well tested, our profession too large in numbers, our State organizations too numerous, our own self-respect too vital, our journals too widely circulated, our authors and books too much appreciated, the people already too indoctrinated and impressed with our success, our own discovered remedies too well known here and in Europe, and, we may add, our opponents already too wavering and divided as to calomel and bloodletting, and as to whether in medical practice they should stimulate or depress the vital powers, to admit of a doubt as to the triumph of American eclecticism. Through eclecticism and over allopathy, this reform will pass!

How may we further perfect this system and thus make triumph valuable? And what shall we do to speedily and completely accomplish a result so earnestly desired in our heart of hearts? We devote the remainder of this hour to a consideration of this subject.

Let me suggest, first of all: We must perfect a system of organizations. We have referred to the utility of these, but what organizations are needed and practicable? It must occur to all that we need city or county organizations throughout the country. Almost any county is a field of sufficient size to include physicians enough to form just as good a society as can be formed. In such societies every man feels obligated to do his share to maintain the interest and value of the meetings; and the work growing out of this responsibility makes every man grow. He blesses others, but he benefits himself twice as much as he does others; for the Roman adage, "*qui docet, discet*,"—he who teaches learns—is most eminently true. In a society of from twelve to fifty members, every man feels that he can have time to put in his testimony to the subject under debate, or make inquiries. In a large organization, subjects must often be referred to committees, and many subjects have to be dropped before all can have the opportunity to discuss them, or make inquiries concerning them. County organizations are practically working ones, in which every man rapidly improves—becomes more varied in his knowledge, and more exact in his knowledge. County organizations are springing up in many states, and they should be formed in all localities where even six physicians are willing to pledge themselves to the high purpose of mutual improvement. Wherever they do it they assume a position at once, which challenges public approbation, and gains personal patronage and advantage to every member who is worthy and faithful. Society says: These men are not merely individual reformers, with personal crotchets and crude notions; but they are an earnest, associated, intelligent body of gentlemen, meeting every month to increase their usefulness to us; and we hail and recognize them as such; and we will sustain by our patronage, this organized zeal, intelligence and professional worth.

State societies are equally useful. Though they meet but once or twice a year, they often receive and discuss the essays previously read at the county or district societies, and secure the publication of the most valuable of them, for the benefit of every medical man in the State; they secure similar essays and discourses for their own meetings, and for publication; they secure co-operation and friendliness among their members; they secure a legal incorporation as a State society, and eventually a State library; they assist worthy young members in the profession to secure good locations for practice; they animate and influence all to

higher attainments; they organize and sustain an influence in favor of valuable medical journals and medical colleges; their members form very pleasant acquaintances with each other, and exchange views in personal conversation, or in debate, in reference to new diseases and new remedies. They make themselves known as individuals, and their system of practice known to the whole public, through those reports of their meetings in the newspapers, which go into every household in the State. Surely the mere statement of such advantages should lead every State to have such an organization, and every enterprising physician to belong to it; to do all the good he can in it, and to get all the good he can from it.

This society is an eminent example of the usefulness of such an organization. One hundred and two physicians had recorded their names as members of this society previous to our present meeting, men residing in every section of the State, and most of them practioners of at least ten years experience. With a legal incorporation as a society we are, as to our recognized lawful rights, as individual physicians, and as an organization, the peers of any other medical men or medical association. And we are not only equals before the law, but the State of New York has, this year, for the first time, published the Annual Transactions of the Eclectic Medical Society of the State of New York. This is certainly an advantage to us of the highest value. All the discussions, reports of cases, and papers, presented in every district society in the State, as well as those in the State society, are thus embodied in one volume, to a copy of which every member in the society is entitled. No man's usefulness is now limited to his own district society; but every member can contribute to the common improvement and practical success of every other physician in the entire State, and hundreds of communities be blessed with the results of this increased professional knowledge. This plan of publishing the annual transactions of the allopathic, homœopathic, and electic State medical societies, in separate volumes, is worthy of that breadth of public opinion and official legislation, and that desire to promote the general good of all her citizens, which so eminently characterizes the Empire State. Each system of medical practice has now its annual exponent, for the examination of intelligent legislators and citizens; and eclectics, believing their principles and their practice pre-eminently good, are deeply grateful for an open field and a fair fight. With such equal advantages, if we do not achieve a perfect triumph, we are not worthy of it, we

shall not deserve to triumph. We regard the holding of two meetings of this society in each year, now revived in our present gathering, as of the highest importance. Our annual meeting must of necessity be largely devoted to the choice of officers, and the transaction of business relating to the general interests of the society; but this can all be transacted on the first day, and thus the second day of the annual meeting, and both days of the semi-annual, can be principally devoted to the discussion of the discoveries and improvements in medicine and surgery among our members, and in the profession generally.

A National Eclectic Medical Society should be formed at once. We want a uniform standard of medicinal preparations throughout the country. We want—we very greatly need—a Pharmocopœia, which should be prepared by medical men selected from the several states. You are aware that our own and several other state societies, have appointed committees to join those of other states, to perform this undertaking; but most of the states should be united in this work, in order that its formulae may be adapted to the treatment of all the diseases incident to all the different sections and climates of our common country, and be put forth under the sanction of a National society. This work is already in active progress, but the different committees should meet, compare their labors, suggest improvements and submit their labors to the approval of, and secure the sanction of an American Eclectic Medical Society. Another labor of this national society should be through a committee, annually to select all the valuable matter from each of the state societies' annual publications, and issue them in an annual volume, along with the essays and proceedings of the national society itself. As it is, we are all working for a few. We benefit only the fifty, or one hundred, or two hundred who belong to some state organization. The plan proposed, carried out, would interest, instruct and greatly gratify, several thousand practitioners. Now, so far as the profession of the whole country is concerned, "our work is but waste."

Another duty is to sustain medical colleges. We must educate men for the eclectic profession, or we must give them into the hands of other colleges to be educated. If we have no colleges, these young men will study and graduate at Bellevue, and Long Island, and New York University, and like institutions all over the land. They will go where our principles are unknown; where our remedies are only imperfectly known; where measures of

depleting the system and exhausting the vital powers are taught and practiced; where allopathic professors will say to their classes, as did one of them recently, in referring to our agents: "these agents may be good, but, gentlemen, they are used by irregulars, and I advise you to have nothing to do with them."

Nor is this all. The students of all eclectic physicians, and those of homœopathic physicians, are already, by a vote of the New York State Medical Society, at their meeting held at Albany, on the 5th day of February, 1867, practically excluded from all allopathic medical colleges. They may, indeed, attend those colleges, but they will not hereafter be allowed to graduate from them, let their acquirements be what they may. Dr. Hutchison, of Brooklyn, Professor of Surgery, in the Long Island College Hospital and President of the State Society, in his inaugural address (we quote from the *Medical Record*, an allopathic journal published in New York), "called attention to the fact that some schools had granted diplomas to students in the offices of irregular practitioners, upon the plea that they could not go behind what the law had seen fit to recognize. He held that a school was simply *empowered*, not obliged to confer degrees, and that a faculty *may*, not must, recommend a candidate."

Dr. Brinsmade "recommended that in the issue of college circulars it be distinctly stated, that certificates of study from irregular practitioners will be disallowed, and that they will confer no degree upon any one avowing his intentions to practice medicine in accordance with any exclusive system." The report in the *Medical Record* further says: "The suggestion regarding the course to be adopted by colleges was presented as a resolution and carried."

Here, then, we have the decision of the New York State Medical Society that no man shall be graduated from one of their colleges who studies medicine with any physician not an allopath. The law of New York directs that all graduates shall have "been regularly engaged in the study of physic and surgery with some respectable practitioner for the term of three years." It supposes that any man who thus studies with any respectable practitioner of any school, and who complies with the other specified conditions for graduation, shall be entitled to a diploma. The New York State Medical Society have, as it seems most clearly to us, by their recent action just referred to, formally voted to deny to such students their rights under the laws of New York in two

ways. First: By disallowing any certificate of study which such students may present to any college faculty, if that certificate come from an "irregular practitioner"—that is, from an eclectic, or a homœopath, or any other man who is not an allopath. Secondly: These colleges will confer no degree upon any one "avowing his intention to practice medicine in accordance with any exclusive system"—that is, upon any one who is not committed to practice allopathy. Thus do these colleges, endowed by the State for the benefit of all those who would study medicine, impose restrictions, as to those who should graduate, entirely unauthorized by law, and contrary to the entire spirit and purpose of the law. Some of these colleges had heretofore granted diplomas to others than allopaths, "upon the plea," as Professor Hutchison expressed it, "that they could not go behind what the law had seen fit to recognize;" but the proposition now incorporated into the official action of the State society is to deprive every young man of his right to graduate under the laws of New York, by imposing the additional conditions that his term of pupilage must be with an allopathic practioner, and that he must be an allopathic practitioner himself.

Thus, gentlemen, do these institutions, endowed in part by the State, for the equal benefit of all seeking medical knowledge, and for which you and your fathers have been taxed and paid your taxes, now propose through the action of a State Society to practically close their doors against any young man who, from his own convictions of right, studies with you, and against any young man who studies with your intelligent homœopathic brother.

The homœopathic and eclectic families of New York and Brooklyn now pay, and have paid for years, more than one-half of the millions that have built up the colleges and hospitals and infirmaries of New York and Brooklyn, and now these professors and the State Medical Society of New York turn round and say to the people of those cities: Your sons cannot graduate from the institutions which you have endowed unless they study with allopathists. We believe in no liberty of views in medicine; we are right; all others are wrong; we care nothing about your convictions of right as to methods of medical practice; we care nothing about your rights as citizens and taxpayers; we have the power in our hands, and we will use it to deny to any man a graduation from our halls of medical science unless you deny your medical

faith and make yourself our servant, to be moulded, like *papier mache*, into any model we propose.

We now only show up this wrong, and make our protest, as citizens of the State of New York. But in due time, we believe that eclectics and homœopathists will have all their lawful rights in such of the colleges, hospitals and infirmaries as have been endowed and supported by the public purse; or, that they will demand and secure the establishment and support of such a number of colleges and hospitals and infirmaries as shall be proportionate to their proportion of endowments and taxes. Public justice can do no less than this. Now *might* makes right; but the time is not far off when *right is might.*

But we have here to ask (and we would that this question could reach every eclectic physician in the United States) do you want your sons and your students taught in such medical colleges? By men, too, whose ideas of medicine are not only so wrong in your estimation, but by men who would rob you of your civil rights, condemn you as quacks, and consign your name to infamy as illegitimate irregulars, whilst they secretly use your remedies, or openly speak of them in the medical press, and in medical colleges, and in medical associations, without acknowleding that any such men as Thomson, Beach, Morrow, Newton, King and Merrill ever existed? It would be to insult you to suppose that you would wish to support such faculties of medicine. We can pursue this subject no further. Your views of the treatment of inflammatory and febrile and most other diseases, are radically opposed to allopathy. You believe your views correct; you have proved your practice, and you have no desire to encourage a system which you believe to be wrong in theory, and wasteful of life in practice. We have our own colleges, in different States, chartered by the rightful "powers that be," and taught by men who have devoted many years to the profession; and to further endow these colleges and encourage their faculties and fill their halls with students, we believe you will consider to be your highest privilege.

Another prime duty of eclectic physicians is to sustain and contribute to medical journals. To every physician the medical journal is an imperative necessity, keeping him constantly informed of the new discoveries in every branch of medical knowledge. But to eclectics they are of still greater value, for many of our remedies are only partially tested. What one physician can have

a variety of cases sufficient to test all these remedies? Surely, no one. But one physician who has cases which seem to indicate alnuin, must test that remedy, and report results through the medical journal; and his brother practitioner, who has cases which seem to require ampelopsin, should try that, and give his report. Thus may we secure a number and variety of provings, which shall be of untold value to every physician; which shall sift our list of concentrated remedies, and so inform us that we shall know what to prize and what to reject. From some statements in reference to the trade of certain parties in New York and Cincinnati, engaged in the manufacture of our "concentrated remedies," we judge that nearly one hundred thousand dollars worth of them were last year sold in Europe alone; and by them we are to be judged, and our reputation established, or our system condemned by the medical savans of Great Britain, France and Germany. Many of these remedies we have proved, and they are established; whilst others have not received our own full endorsement here at home; for we have not, as a profession, successfully tested them. They are on trial as yet. What a matter of honor, as well as usefulness, is here involved. And yet these provings cannot be known, and the real place of these remedies be established, except through the united labors of individual physicians, testing them and reporting results through the medical journals.

Again, we must have, as already suggested, an eclectic pharmacœpia. As this matter now is, there is neither science for ourselves nor scarcely safety for our patients. There is quite a difference in the strength of some of the tinctures, as prepared by the United States Pharmacopœia, and as prepared by the eclectic dispensatory; and it only by the use of much care that we avoid mistakes..

But this is not all; we soon shall have a large list of concentrated tinctures. The profession is rapidly becoming convinced that the tincture, when rightly prepared is, in a very large proportion of cases, the very best preparation of medicine. But the relative proportions of alcohol and water, to be used in such tincture, to extract the properties of the different plants, is to be very different from what it has been. The old proportions of one-half alcohol and one-half water, generally adopted for most tinctures by the United States pharmacopœia is to be set aside, as entirely unscientific and impracticable; and a proportion of each must be used for each plant, according to the relative solubility of the

active principle of each plant, in water and alcohol. It belongs to us to establish, by a national organization, as before suggested, an eclectic pharmacopœia, which shall furnish formulæ for the preparation of these concentrated tinctures, of ordinary tinctures, and of saturated tinctures. We greatly need an officinal list of strong tinctures, for the pocket case of both city and country practitioners, which shall be as strong and as pure as it is possible to obtain; tinctures at least four times the strength of the present officinal tinctures of the United States pharmacopœia. They can be prepared without heat, and preserve the exact properties and aroma of the plant far better than any fluid extract. They are clear and beautiful preparations, but they require choice materials, experienced manipulation and powerful machinery. But when thus prepared, they are beyond all value to every practitioner. When we have a pharmacopœia which shall establish the formulæ for the preparation of these, and all other medicinal preparations, more perfectly than the United States pharmacopœia, and more perfectly than the present eclectic dispensatory, we shall have far better remedies; and we shall all understand each other, as to remedies, in our reports of cases. It will be a complete and uniform officinal guide for eclectic druggists throughout the country, in the preparation of their remedies; and great improvements can be introduced in reference to all classes of preparations. Our remedies will be not only more uniform, and be officinal; not only more compact and convenient; not only more efficient and choice, but formulæ should be introduced, whenever possible, by which efficient, pleasant medicines shall be introduced. This is not merely a matter of taste, but of the highest practical importance. We have no right to dose our patients with nauseous mixtures when, with more study, pleasant remedies and more efficient ones can be used. Our professional success demands this, because unpleasant medicines are not, in very many instances, taken regularly; not unfrequently they are greatly neglected; and if all here could now give their testimony, we should have the evidence that sometimes they are thrown away.

Society has arrived at a refinement and civilization when a large majority of adults will not continue to take from day to day, unpleasant medicines ; and when parents will not consent that their little children shall be drugged with them. Let us recognize this fact. It seems entirely probable to us that homœopathy owes three-fourths of its patronage and popularity to pleasant medicines.

And from our own observation of, and experiments with, the materia medica, we believe, that by directing special attention to the preparation of compounds, nearly all of them can be made palatable. This feature should receive special attention in the preparation of our National Pharmacopœia.

We believe, too, that two-thirds of all the articles and compounds of the allopathic, and very many of the eclectic, materia medica, should be expunged from the Pharmacopœia; whilst only the eminently valuable and for the most part pleasant, agents and compounds should be admitted.

We must develop our own indigenous materia medica, and introduce whatever is of value, from both the allopathic and homœopathic systems. As eclectics, we have introduced a great number of exceedingly valuable agents from the fields and forests of this country; and every plant and flower of the field looks up to us saying: Can I be useful to you in healing the sick? One of the far-famed pulpit orators of this state, Henry Ward Beecher, has beautifully suggested that if he had no other evidence of the benevolence of deity, than the flowers which beautify the fields, it would be enough. They teach us that God meant to please man, gratify his taste—by these objects of beauty. But this is not the only lesson of flowers. They are not only things of beauty, the minor poetry of nature, and the smiles of God, but they are utilitarian. They are for use—sacred and precious use in restoring the sick, and healing our physical infirmities. We would perfect, to the utmost, a system of remedies in which shall be united the bounty of God and the science of man.

Finally: We think it to be the duty of all eclectics, to make our system known to the people; expose the errors and bigotry of our opponents; conciliate and enlighten all who are seeking medical truth; modestly but firmly maintain our own rights in the profession, and through the people; and do all we can to establish our system.

Our reasons and consciences forced us to adopt this new system. We did not believe in the depleting, poisoning and reducing measures and remedies of the prevailing system; and we did believe in rallying and restoring the vital powers to throw off disease; and in agents, mostly vegetable, which chiefly acted in harmony with the physiological action of the system, and which were efficient. We have depended too, largely depended, for success, upon instructing our patients to obey physiological laws. We

have been practical teachers of hygiene in almost every community. Twenty years ago, physicians generally were silent to their patients in reference to hygienic laws. They bled them, and vomited them, and physiced them, and opiated them, and then so poisoned them with mercury that they would be liable to very frequently need their services ever afterwards; but as to informing them how to live, and how to avoid disease—that was entirely unprofessional. Why it is scarcely two years ago that we saw the announcement in the Philadelphia Medical and Surgical Reporter, that a new professorship had been established in one of the schools of that once famed, but now failing centre of medical education—a professor of hygiene—the first ever appointed in this country. Twenty years ago last autumn, he who now addresses you was invited to the professorship of physiology and pathology in a southern medical college. I accepted the appointment on the express condition that the professorship should include hygiene; and it was most cheerfully acceded to. We do not wish to have this honor taken from the eclectic profession and eclectic colleges; for all our practitioners have ever largely depended upon hygiene for the cure of their patients. In very many cases, especially nervous diseases, we have prescribed much hygiene and little medicine—and not unfrequently, two anecdotes to one antidote, and two puns to one pill.

In forming ourselves into a new organization, we took the name eclectic—choosing the good from all—and this name and principle is good for all time; for every new development of remedies; and it broadly asserts a liberal and scientific platform. It tests the remedies of allopathy, homœopathy, hydropathy, and every other *ism* and *pathy;* and adopts with critical fairness all that is good. Eclecticism embraces, and ever will seek to embrace, all medicine which is legitimate with the reason of the impartial man of science. Such a system approves itself to the man of common sense; it approves itself to the logic of every educated man who knows what an inductive system of reasoning is; it approves itself to the liberal man, as opposed to the chrystallized bigotry and mouldy tyranny of the past; and we ought to make our views known to the entire community. Tracts, clearly defining our views, and stating our success, should be published and distributed into every family; and we should seek to diffuse our principles by popular lectures, and through the press. The people ought to know, too, that we have a literature—one of

which we may be proud—a literature which embraces, as we judge, more works on the materia medica, during the last twenty years, than have been published by the allopathists of both this country and England together. The truth is that eclectics are the progressive scientific party in medicine; and we think that we are correct in saying that no position in reference to methods of treatment, generally adopted by eclectics, within all these thirty years past, has been successfully controverted. Our opponents are now violently contending among themselves as to many of their remedies. A large party of medical leaders in England are now denouncing bloodletting; and Dr. Ives, of New Haven, in a recent essay before the State Society of Connecticut, radically opposes the use of calomel, and totally denies its long supposed specific action upon the liver; and Prof. Hodges, of the Massachusetts Medical College, recently stated that "mercury was not so much as to be named as a medicine." The world does move, though every new thing is to them an innovation. Why, the discovery of the circulation of the blood was at first pronounced by them as a vile error; and vaccination was an infernal mischief. And just so in regard to the numerous medicinal plants and the invaluable preparations from them which the American eclectics have introduced into practice. Twenty years ago we introduced podophyllin as an innocent and efficient agent to act upon the liver and as an alterative; and gelseminum as a febrifuge and antispasmodic. They have been given to hundreds of thousands of patients, and they have been a benefaction to them; and hundreds of articles have been published concerning them in our medical journals. Just now the allopaths are beginning to learn their value, and in the State Convention in this city, in February last, the attention of the profession was called to them, but not one word was said as to their discovery or extensive use by the eclectics. Precisely the same is true in regard to at least fifty other invaluable agents discovered by us. Our discoveries have all been first neglected, then opposed, and the discoverer loaded with infamy if possible; and they never acknowledge any of our remedies until compelled to use them by public opinion; and they ever refuse the fraternity and fellowship of the profession with all who are progressive.

Eclecticism. in the spirit of hopeful progress, welcomes all, at once, to investigation, then to proof; then to acceptance or rejection, as the new doctrine deserves. As a teacher of the theory and practice of medicine in the Eclectic Medical College of the

city of New York, we have again and again advised our students to pursue the treatment recommended as the best, until something better is discovered; but to be on the most active look-out for anything which is discovered; at once to prove it, and, if better, immediately adopt it. Such is the spirit of eclecticism always and everywhere.

Allopaths generally do not know our doctrines or our remedies. They are educated in other principles and other remedies, and their views are so fixed that not one in ten of them could make a good eclectic physician. Our place and duty toward them is, generally to let them alone; to avoid all personal controversies and party controversies, except when justice compels us to controversy; but everywhere let us proclaim our own principles. They openly declare themselves our enemies, and we must never throw ourselves into the hands of our enemies and place ourselves at their mercy, by desiring their consultations. We have men in our own societies who are so versed in every branch of medical and surgical and chemical knowledge, and so versed in the specialties of the profession, that we have not the slightest occasion to call in the assistance of those who would destroy our system and our school in an hour, if they could.

How differently have we been treated by homœopathists! For the most part, they certainly have treated us like gentlemen. They have let us alone. Neither by controversy nor by attempting to debar us from an equality of privileges under the law, have they sought to injure us. Their conduct has said: we depend on the merits of our system, and we have no occasion to fight any one unless in self-defence, and to correct misrepresentation. And in some of their published works, as in Hale's "New Homœopathic Provings," they have given full credit for all our discoveries in regard to remedies.

Thus have we endeavored to point out the lessons of its past, and the hopes of the future, of eclectic medicine. And that future is bright; we need only to be true to ourselves; we must organize thoroughly, everywhere; we must, every man of us, be an aggressive missionary to convince the people; we must sustain our medical colleges and journals; we must establish hospitals, embracing every advantage of modern science and new remedies, hospitals that are, indeed, homes for the sick, where all can be "tenderly cared for."

Pursuing such a course right onward, and working and waiting, we shall do our duty and have an approving conscience; we shall secure the influence of woman, without whose all-prevailing power and aid even our nationality might have been lost in the recent struggle. We shall have friends, too—friends with money and friends with brains—who will assist us to organize and energize our public progress, and our colleges and journals and hospitals.

Gentlemen of the Eclectic Medical Society of the State of New York: To this good and great work, would we, in this anniversary hour, and in this temple of public justice and humanity—this legislative hall of the most populous and most influential of all the states of the American union—dedicate ourselves anew. It is our high mission, day by day, and year after year, to contribute toward the perfection of a system of medicine, liberal in its principles, founded in the impartial use of facts from every source, and blessing all mankind.

ARTICLE VIII.

Report on the Theory and Practice of Medicine. Presented at the Annual Meeting, June 12, 1867.

Mr. President and Gentlemen—We do not flatter ourselves that in these few remarks and suggestions, we shall be able to present any new ideas to the mind of the scientific or literary man. This is not our purpose, but to call your attention to, and press home to your minds, certain facts and all-important truths, which are wholly neglected or little regarded by many.

The great and important point or principle in the theory and practice of medicine is that we keep in view and practice the use of *sanative medicine—safe remedial agents*—and discard the more destructive and life-destroying mineral agents.

Is it not a lamentable fact that many of our brethren are, in their researches and investigations of agents and new discoveries, adopting the same plan and principle that the disciples of allopathy have pursued and practiced for years, to wit: the greater and more virulent the poison, the better the medicine?

We ask, why is it that our friends carry their investigations in this direction? We often find them experimenting in the use of lead, zinc, sulphate of copper and other agents, which I need not further enumerate. But why do we not hear of more studying into, and investigating the thousands of simple, harmless, yet efficient vegetable agents to be found under our feet in our daily walks, and strewn in profusion and abundance by the Almighty all around us? Has not Providence been kind in providing in such abundance and great variety of needed things for man and beast? Then why seek after those agents which possess killing properties instead of healing and healthful?

This position, or *standpoint*, may be thought by some to be the "sectarian influences, and associational dictation, and bigotry which it fosters." But without association, organization, systematizing and uniting on some governing principle and fundamental truths whereby our chosen profession may be known, why should we claim to be reformers in medicine, and to present to the people a *better* and safer way to alleviate their sufferings and to cure disease?

The allopath says he is eclectic, liberal in his views, choosing or selecting his remedies from any and every source. My friends, this is the rock on which so many of our would-be liberal minds, who fear sectarianism, founder; stepping on the old platform, and disregarding the new, which is, that medicine must work or act in harmony with and assist nature.

At this age of progress and reform, man lives more, so to speak, in one year, than in twenty years half a century since; and when many physicians of the old school are adopting many of our best and most efficient agents in their practice, and using less of their "heroic" medicines, and some wholly abandoning the use of active poisons, and yet some of our brethren use many poisons in their practice—strange, unaccountable and inconsistent fact.

Beware, my friends, lest old Allopathy steal our thunder. A physician of my acquaintance (old school), now deceased, abandoned the practice of medicine for the reason that he killed so many. He said openly and repeatedly that "if the physician depended on poisons to cure disease, he would kill more than he cured."

Another old and candid physician, of Lewis county, said, late in his professional career, that "he had killed a great many persons, not intentionally, but knew he had killed a great many;" and, said he, "I guess I have cured some."

Am I told that Eclectics, as a school, discard the irritant poisons? such as mercury, antimony, arsenic, &c. Very well; but can the vegetable narcotic and irritant poison be used with safety? Those articles which the dumb beast is taught by the God of nature to avoid; agents which possess not one grain of nutriment or sustenance, and all the nobler, as well as the lower, animals of God's creation avoid, except man.

We are told the same old story, or argument, which has been used by the old school for a long time, that they are safe and good medicines in skillful hands. But every observing physician or person of experience knows better, however strenuous an advocate he may be for the use of poisons. We repeat, he knows better.

Is it not an acknowledged fact that such agents, used as medicine, annually slay their thousands? Have we not the highest authority sustaining the affirmative of the question? A volume of testimony might be produced in proof of this.

Strange and inconsistent as it is, the physician gives the same

article to cure the sick man, that the assassin does to kill! A quantity sufficient to produce death will have the same effect, or produce the same result, given either by the assassin or physician. There is no dodging this fact. The whole scientific world cannot controvert or disprove it.

Almost daily some valuable life is sacrificed through mistake or carelessness of some physician, clerk or druggist, as in the recent case of Mrs. D. B. Chambers of Brooklyn, an estimable lady, formerly of Lewis county, and daughter of an eminent lawyer. Is it not painful to contemplate for a moment the sad occurrence: killed with *nux vomica—dog button*—on the prescription of a physician, although a mistake in giving an over-dose. *Strychnine*, used to kill dogs, and prescribed to this lady to cure neuralgia, a nervous affection! Away with such dangerous nonsense and inconsistency, when we are furnished with abundant means of cure for all curable cases—efficient, safe and simple.

This is the true *standpoint.* Never for a moment lose sight of this land-mark. But keep your standpoint, or base of operations always in view. We never could see the propriety of poisoning a man because he was so unfortunate as to be sick.

In your explorations of the realms of science, for undiscovered truths, and unknown and untried agents, seek not for potent poisons, but stop and examine the simple plant under your feet; for in it wonderful curative properties may be found.

The most astonishing cures by any class of physicians, in modern times, were performed by the early pioneer root doctors—"Botanic doctors," as they were called. They were men of very limited education or scientific attainments, but of strong minds, good judgment, and close observers of men and things; and their lack of education was more than made up in possessing a large amount of common sense—a valuable and very useful commodity.

This class of men, or doctors, were persecuted, prosecuted and imprisoned by the disciples of Esculapius, and for this reason they practiced great secresy in procuring their medicines and in their treatment of the sick, for fear their persecutors would obtain their knowledge. And in this way generally their skill and knowledge died with them. Inestimable and valuable knowledge has been lost to the world, because of the persecution and abuse those men suffered.

Their standpoint was sanative medicine—safe, simple agents.

They obtained their medicine from the woods, the plain and the marsh.

The world has never given due credit to those men, as reformers and martyrs in the cause of suffering humanity, for their undaunted courage and perseverance as pioneer reformers in the practice of medicine, and for exposing the fallacies and errors of the popular practice of their day, which, thank God, has become very much in disrepute with the people.

But remember, my friends, we have the same implacable and bitter enemy to contend with, who has opposed all reformers—Botanics, Eclectics, Homœopathists—inch by inch, in and out of our legislatures, at every corner, and all appropriations, and acts, looking to reform, or any innovation of said old school practice. The only excuse we have to offer for our brethren who use poison as a medicine in any form, or of any kind, is that we don't know any better.

The new school is but in its infancy. It takes time to work these great changes and reformations. But that there are innocuous vegetables, the properties of which are imperfectly understood or unknown, yet which are provided in abundance to fill every indication, and cure all curable disease, there is no doubt. In this our faith is strong, our hope ardent, that the time will come when, if physicians do not cure, they will have the happy and consoling conscious reflection, that they did not kill.

In conclusion, allow us to relate an incident which took place in Jefferson county.

A gentleman who had just lost a number of his family under the treatment of poisons, said to his physician (with whom we are personally acquainted), that "this is the last doctor's bill I shall ever pay; I shall never employ a doctor again, so long as I live and have my senses." The doctor replied, "that drowning men catch at straws, and you may yet be glad to see the doctor." The gentleman answered, "*No, never!* I shall trust in *God Almighty* and *catnip tea.*"

L. STANTON, M. D.,
D. E. SMITH, M. D.,
Committee.

ARTICLE IX.

Report of the Committee upon Materia Medica. Presented to the Society June 12, 1867.

At the last annual meeting of this Society the undersigned were appointed a committee upon the subject of Materia Medica, and in fulfilling the object of that commission they have the honor to present the following views to your consideration. Your committee have given the subject considerable attention, and have been led to the conclusion that it is one of the utmost importance to medical science, and in its various bearings, they believe, it is second to no other branch of the profession of medicine. They fear it is too often thought by the medical man that if he is acquainted with a few of the leading remedies of the different classes, he is abundantly able to treat any of the manifold diseases to which flesh is heir, with sufficient success. It perhaps suggests itself to his mind that if a remedy will not produce diaphoresis, it may induce catharsis; and by this means resolve the diseased portions into healthy tissues; that if his potion will not promote expectoration, it may stimulate the renal secretions and carry off the disease in that direction; and thus he may acquire the habit of depening upon too small a variety of remedies, and those of a more general character in their effects, instead of seeking for those whose influence is more specially directed to those tissues or organs which are more particularly diseased.

Your committee believe that the subject has been too greatly overlooked among physicians generally; that they have insensibly fallen into the practice of using certain articles for too extended a variety or range of disease; that they are likely to confine themselves to a few which, with them, have became a sort of hobby, if we may be allowed the expression.

We may not expect specific remedies in every disease, but there are those which appear to exert a specific influence in certain classes of disease; as diaphoretics, sudorifics and sedatives in fevers; cathartics and diuretics in dropsies; expectorants and relaxants in asthmas; and tonics in general debility. But these are not those specific effects which we mean by the particular use of the term. There are some remedies which appear to exert an

especial influence upon certain diseases, apparently without reference to the effect produced upon the various organs, tissues, or secretions of the body; these seem specific in their character, and may be termed specifics. For instance, quinine has a specific influence upon intermittent disease. This may be in consequence of its active and available tonic properties, or the power it has of changing or breaking up the morbid chain of action, which is present in the body. Cimicifuga has a specific effect in rheumatism, and dioscorea villosa in billious colic, as well as sulphur in scabies. We might also refer to the action of colchicum in its effects as an agent in the cure of rheumatism, in which it will often succeed in curing the disease. Numerous other articles in the Materia Medica appear to produce special effect in special cases, and although we do not always understand their precise action, the peculiar influence they exert in all cases upon the tissues involved, nor why the remedy should be serviceable in arresting certain diseases, we yet have a positive knowledge of their efficacy, and administer them with all confidence in their curative properties, because they have proved reliable remedies previously, in similar cases. The learned physician, who loves and is engaged in the practice of his profession, will not be likely to fail in being successful in the treatment of his patients by having a too intimate knowledge of the various articles which go to make up the Materia Medica, nor of their direct effects upon the animal economy. Some agents possess properties which would be very serviceable in the treatment of certain cases of diseased action in some parts of the system, while they might also possess others which would prove very injurious, and would more than counteract their useful properties, and thus might do much more harm than good. Consequently we cannot study the various properties of remedies too closely, and we shall find, with due care and discrimination, that many of them possess properties with which we had hitherto been unacquainted. Your committee feel that while, as a branch of the profession, we have greatly added to the valuable remedies embraced in the Materia Medica, and have largly enriched it with many almost indispensable articles to the practitioner of the present day, yet that our knowledge of the subject is still too limited, that we ought to pursue our investigations till we succeed in finding remedies that shall be as potent in curing many now obstinate diseases, as we have heretofore been successful in

obtaining those which are effectual in curing those which were formerly difficult, but are now easily controllable.

It must be admitted by all that we have sought and discovered many of the most reliable and valuable remedial agents that are in use at the present day, that we have almost effected a revolution in the treatment in many grave and severe affections, mostly by means of the remedies we have discovered and brought into use for their cure. We cannot too highly commend the valuable properties of the podophyllin in its effects upon the liver and other glands of the body, nor can we sufficiently rejoice over the fact that its thorough yet gentle influence in biliary affections, is rapidly driving from use those dangerous mercurial preparations which have so long disgraced a profession claiming superior attainments in science and knowledge, and which have been so often reported as being without a peer or a substitute. But their days are now numbered. Saul was said to have slain his thousands, and David his ten thousands, but these have proved the destroyers of millions. And still, there are those who inexcusably empty them into the human stomach, although their use has been publicly condemned by some of those who fraternize with their advocates. Besides this we have irisin, and several others upon which we depend in hepatic diseases; in fact, we have an abundant list of safe and potent remedies which we use in their treatment, not one of which but is as harmless, if properly employed, as the air we breath or the water we drink. We have made, in the last quarter of a century, such copious additions to the materia medica, and principally of remedies indigenous to our own country, as to form an era in the history of the science of medicine; and we have done this in the face of opposition from those who have claimed to be the only regular members of the profession, the great Sanhedrims in medicine, from whom there was no appeal.

Notwithstanding they have discountenanced our efforts, notwithstanding they have opposed us in almost every possible manner, we have still pursued the even tenor of our way, and shown our faith by our works; for we have changed entirely the treatment of many of the most formidable diseases, and by our success have gained the confidence and esteem of the people; and where our practice is fully known, it is thoroughly appreciated, and our patrons cannot be persuaded to place their lives, or the lives of their families, in the hands of any other than an Eclectic, if one can be obtained. Our success has been so great and our remedies have

proved so efficient, that others have used them surreptitiously, and without giving credit to whom credit belongs, for their discovery and use. But if we derive benefit from them in no other way, we shall have the conscious feeling that humanity will gain from their employment, although we may be deprived of the merits, in some cases, which should attach to us as discoverers. But history will eventually set the matter right before the world, even though enemies may attempt to prevent it.

Closely and intimately connected, in fact a part of the subject under consideration, is the mode of preparing the active principles, the medicinal part of plants, for use as remedies. It is well known to you that but a small part of a crude vegetable substance is useful or available as a medicine—that the greater portion consists of ligneous, starchy or other substances that are inert as medicines, and are consequently but cumbersome to the stomach when taken into it in connection with the medicinal portion. If these can be properly separated from the material which is useless, they can be used in quantities so small as to prove less objectionable and offensive to the stomach, and we could therefore get their curative principles in a small compass, while the extraneous and inert portions may be rejected as useless. With this object in view, Eclectics sought means of accomplishing this; they prepared the active principles of various medical plants, and introduced them to the notice of the profession. They originated the plans of doing it. These articles are among the greatest achievements of the age, they mark an epoch in the practice of medicine, and when they are manufactured in a proper manner, the physician who becomes accustomed to their use cannot well dispense with them. They are so convenient to prescribe, they may be carried in the pocket or in a small case, and the virtues of a large amount of crude articles are thus condensed into a minute quantity.

Improvements are constantly being made in their mode of manufacture, and some of them are readily reduced to a salt, so they are easily soluble in water or in the fluids of the stomach, and their virtues may be absorbed and produce their medicinal effects speedily. These articles, when properly made, are to be relied on in practice as being among the best known to the profession, and if they fail to prove what they ought to be, it is in consequence of unskillfulness or ignorance in their preparation, or motives not in consonance with the best good of Eclecticism. Some who have engaged in their manufacture appear to have been

actuated by a commercial spirit, have made them for the money they could make in doing so. Your committee have been informed that many of the preparations purporting to be the active principles, are nothing more than alcoholic extracts dried and powdered and put up as the real article. Some have been glad of the patronage of Eclectics in the early days of their enterprise, when the articles were but little known and their sales were comparatively limited; but now, when they are more extensively introduced into practice and the sales have become immense, and they are used by all classes of practitioners, they attempt to deny that they are Eclectic medicines, and do not wish to have them known as such, but as the medicines bearing the name of the firm which produces them. After Eclectics have been engaged so long in analyzing them and obtaining their active principles, and testing and proving them as remedies, now, forsooth, they are not to be known as Eclectic remedies and discoveries, but they must be called after the name of a man! Could impudence and egotism go further than this? It is unfortunate for the profession that men of such want of skill and such inordinate desire for gain should ever have chosen such a branch of manufacture for the development of their energies.

Your committee deem it among the most important questions that have ever come before this society that these medicines should be properly made, so they can be implicitly relied upon by the profession, and they would urge upon it that every effort should be made to have them prepared in their purity in the best possible manner, so that they would command the confidence and respect of the profession; and your committee feel assured that they will achieve a reputation possessed by no other remedies, and they also trust that they may ever hereafter, as heretofore, be known as Eclectic remedies.

WM. W. HADLEY, M. D.,
A. W. RUSSELL, M. D.,
EDWIN FREEMAN, M. D.

ARTICLE X.

Report on Eclectic Surgery. Presented to the Society June 12, 1867.

Notwithstanding the attention of the profession may have heretofore been mostly occupied by the numerous, brilliant and remarkable changes in the practice of medicine, initiated and carried on by the Eclectic movement; we desire now to urge forwards to notice the claims of Eclectic Surgery.

The aim of surgeons of this school has been to work a thorough and complete reform in that branch of medical science, not only in the saving of life but also of limb. This was accomplished by working on the general principles, by which, in practice, such great success has been gained by the use of superior medicinal agents that are harmonious in their action with Nature's operations, and by considering the true pathological conditions. Thus grand results have been obtained in the cure of obstinate surgical diseases that notoriously baffle the skill of those who cling to the old theories, and the equally insufficient practice of the past, in those cases. By our superior means of treating traumatic and other inflammations, we are able, in very many cases, to save a part that would otherwise have been sacrificed unsparingly to the knife, and by the same powerful means we are able to prevent fatal results after operations, which would inevitably follow such operations under the old practice. The ravages of gangrene are arrested, and that formidable condition we can completely restrain, thus taking away one prolific cause of ill-success in many surgical operations. The same remarks will apply to erysipelas, which in our hands is readily controlled.

The worst forms of irritable, indolent, varicose and malignant ulcers are made to heal, under proper sanative measures, such as local applications, fomentations and proper attention to constitutional conditions. Cancer, too, which is so often, in the early stages, neglected by the surgeon, under the plea that nothing can be done for it, or that it will return, is radically cured, saving often to the community many years of valuable lives. To us it seems like culpable, we might almost say criminal neglect, to thus leave a germ of disease alone, to run its course to certain destruction of the body, when it is so constantly demonstrated that it is origi-

nally local, that it can be eradicated, and the life saved. On the principle on which the argument is based for letting them alone, why not let cholera alone, or pneumonia, or typhoid fever, or any disease in which there is a liability to be some attending mortality? Why do physicians treat consumption, and at the same time say it is hereditary, that there is a constitutional dyscrasy, and that it is incurable? They do such things, and yet cry out against the attempt to cure a disease which is, like pneumonia, only sometimes unsuccessful, and on an average is more successful than the cure of consumption. In the treatment of piles and fistula, great success has been obtained, by discarding the use of the knife, which in the former disease merely removed the excresences, and in the latter often destroyed the function of the extremity of the bowel, while, at the same time, the patient was exposed to serious consequences, from the accompanying hemorrhage. By the use of the ligature, that danger is avoided, and all can be accomplished that the knife can do, towards recovery; at the same time, our superior facilities for restoring the hepatic and enteric secretions, and toning up the relaxed viscera, make the results of the treatment not only entirely satisfactory but permanent.

In diseases of bones and of the joints, our success warrants the assertion that we have superior facilities for effecting a cure, especially if, as is usually the case, there be a scrofulous or syphilitic cachexia. By the use of our powerful alterative agents for constitutional effect, the vegetable caustic and our irritating plaster, great changes are wrought, which in some cases seemed almost impossible. In syphilis, in which disease it has been so constantly and confidently asserted by allopaths that it was impossible to effect a cure without their much vaunted calomel, we have, in a large practice, had uniform and unvarying success, without in any instance using it.

When, however, all efforts fail to save a part, and it becomes necessary to remove an offending member, our surgeons are as prompt to take up the knife, for the benefit of their patients, and as skillful to use it, as the cases may warrant. Eclectic surgeons are not at all behind others, either in their anatomical knowledge, or the operative skill necessary for a complete operation. Whether in amputating or exsecting a limb, in the delicate operations on the eye, or the sterner ones of herniotomy or lithotomy; in the ligature of arteries, or the cure of ovarian tumors, they have the fearlessness of those who understand themselves, as well as the

delicateness of good manipulators. In fractures and dislocations, they are always ready, with the most improved apparatus, for the prevention of deformity and the relief of the sufferer.

To the literature of Eclectic surgery, we have many contributions, the smaller running through the numbers of the various Eclectic medical journals. Among the larger, are the early and recent editions, by Prof. R. S. Newton, of Syme's Surgery; Hill's Surgery, and the recent edition of the same by Prof. J. M. Scudder. We would like, and probably shall soon see, other complete works and monographs, as the demand for them increases.

We would here notice the introduction to use in surgery of local anæsthesia. The use of anæsthetics has saved to humanity a vast amount of suffering, and has simplified some of the most formidable operations. Local anæsthesia, as proposed and practiced now by nearly every surgeon, is also a great boon, although in a minor degree, as it is used mostly in minor operations. We might also mention modifications in various operations and appliances, which have been proposed, but which require time to establish their utility, but we have already reached the limits proper for this report. We will close by saying, that Eclectic surgery is not a whit behind Eclectic practice, in its claims for credit, in ameliorating suffering, and saving many valuable lives to humanity.

ROBERT S. NEWTON, M. D.,
EDWIN FREEMAN, M. D.

ARTICLE XI.

Dioscorea Villosa. An Essay read before the State Society, Jan. 15, 1868. By D. E. SMITH, M. D., of Brooklyn.

Gentlemen—In presenting the following paper for your consideration, I am actuated only by a desire to advance the cause of medical reform. The result of the experiments I am about to place before you, are the product of much time, patient research and close observation. I do not claim that all of them are strictly scientific; but I do claim that they were commenced, followed up and ended with but one object in view—to arrive at truth. And if by submitting these tests, and the accompanying suggestions I may make, I shall be able to give you but one new idea by which you may profit, thereby contributing to the relief of the physical ailments of our race, and in so doing, advance in some small degree this great, this glorious, this heavenly work of medical reform, I shall feel amply repaid for my efforts.

The subject to which I propose to direct your attention, for a few moments, is the *dioscorea villosa*, vulgarly called the wild yam and colic root.

It is unknown to physicians, except those of the Eclectic school of medicine. To them belong the credit of bringing this valuable agent to light and giving it a prominent place in the Materia Medica of our country. Though recently, if I have been correctly informed, the homœopathic physicians have been making some investigations relative to the therapeutic action of this medicine.

The *dioscorea villosa* is a native of the United States and Canada. It is a slender vine, twining over bushes and fences, in thickets and hedges, and flowering in June and July. The root is the officinal part. It is long, woody, contorted, from an eighth to a fourth of an inch in diameter, with many, fine, long, scattering fibres of a light brownish color externally, and whitish internally, with a granular fracture almost smooth; inodorous except when bruised, when it emits a faint, peculiar smell, and a not unpleasant, slightly bitter, sweetish and pungent taste. Water and alcohol are its solvents.

At the battle of Trenton, during the American Revolution, Washington captured a large number of Hessians as prisoners of

war; among them was a botanic physician, a Dr. Bone, who subsequently settled in New Jersey a few miles above the city of Newark. To him belongs the credit of first using the *dioscorea villosa* as a Medicine.

This physician for a long time used it as a secret remedy for *bilious colic*, and from his success in the administration of this medicine in this disease, he christened it *colic root.* He gave to the patient half a tea-cup full of the decoction, every half hour; the second dose rarely failed of curing this truly formidable disease. Dr. W. Beach obtained from him the knowledge of this root and it was soon after classified by botanists under the generic name of *dioscorea* and the species *villosa.*

This root is a valuable medicine in many diseases to which the physician is called to administer, and is, I think, deserving of a conspicuous place in all works devoted to medical botany.

It does not belong to a very extensive order, there being but six varieties to the genus *dioscorea* laid down in the works on botany. Some of these varieties have acrid roots; while in others, this part is farinaceous and nutritive. Griffith, in his "Medical Botany," says, "the roots of some of the species were formerly employed in a bruised state, as a stimulating poultice, and as an application to contusions to promote absorption of coagulated blood."

The young shoots are eaten by the Arabs, when in a raw state, and are frequently sold in stalls as a substitute for asparagus. This, however, is an unsafe practice, as botanists inform us that the species *demonum* and the *triphylla* have dreadfully nauseous and dangerous tubers.

I have used the *dioscorea villosa* in a number of diseases with marked success. In all cases of colic, whether bilious or flatulent, it acts well, given in almost any form. The severe cutting pains in dysentery are controlled by this remedy, as if by magic. Dull, heavy pains in the stomach and bowels, such as are produced by indigestion, and even the severe pains caused by enteralgia, are all relieved promptly by the dioscorein. How this medicine acts is something of a mystery. It must have some direct curative influence upon mucous tissue when diseased, or it is a powerful anti-spasmodic. It certainly is not an anodyne; nor is it a narcotic, as it cures the above diseases when the most active anodynes fail to give anything more than temporary relief. From close observation, I have concluded it must be an anti-spasmodic; and

from this conclusion, I expect to use it in dysmenorrhea, biliary calculi, renal calculi, and all diseases that require a powerful and safe anti-spasmodic; believing, as I do, from previous use, that in these diseases it would give prompt relief. At all events a trial of it would do no harm, and I would recommend the members of this Society to use the dioscorein in these diseases.

The author of the Eclectic Dispensatory says of this medicine: "It acts well in small doses, often repeated." On this principle I have acted in prescribing this remedy.

A saturated tincture of the dioscorea was made with 95 per cent alcohol, as may be seen by No. 1, herewith presented. Into this strong tincture I put the No. 5 pills, composed of sugar of milk, and turned them out upon a plate to dry. The alcohol soon evaporates, leaving the medicine upon the pill, as seen by No. 2. Of these pills, I give one every fifteen, thirty or sixty minutes, in acute diseases, and one every two, four or six hours in chronic affections. These pills are not only effectual in the above diseases, but they they have the advantage of being pleasant to the taste, and agreeable to take; a point which I am satisfied we too often overlook. Gentlemen, it is our duty to make our medicines as pleasant for our patients as we possibly can.

I will mention a case that came under my treatment during the past year.

The patient was a Mrs. P., of Brooklyn. She complained of a constant pain in the stomach and upper portion of the bowels, worse at night, so much so as to render sleep almost impossible. The bowels were natural, and the digestion fair, no particular eructations of wind and no more distress after eating than before. I suggested a course of diet, which, however, had no good effect. I resorted to different remedies in my attempt to cure her, and gave for that purpose the different preparations of bismuth, the wine bitters, spice bitters, hydrastin, tonics, etc., etc. Nothing I prescribed gave her even temporary relief. Anodynes alone would lull her pain for a few hours, but had no permanent curative effect. It was an unusual case, but not dangerous; and one of those cases in which the carbonate of bismuth, or the spiced bitters, had heretofore been successful in my hands. In this case they failed. I then gave her a box of these pills, and ordered one to be taken every hour through the day. In twenty-four hours from the time she commenced to take the pills, a permanent cure was effected. Three months have since elapsed and no return of the disease.

This is by no means an isolated case; it is only a fair test of what this remedy will do.

I see by the journals that other physicians, as well as myself, have of late been using this medicine in similar diseases, with excellent results, some of which are so marvellous that I will venture to tax your patience by relating them. Prof. Helmuth, of St. Louis, says: "I was called to see a gentleman who for three days had been suffering the most intense pain in the lower part of the abdomen. A very great variety of medicines had been used in vain. There was a perfectly constipated condition of the bowels, the strongest purgatives producing no action; excessive sensitiveness of the abdominal parietes of the right side, with constant thirst. The pain, although occuring most violently in paroxysms, was constant and was of a violent twisting character. All the usual remedial means failed until the dioscorein was employed. The doses were fifteen minutes apart for the first four, then thirty minutes, and finally every hour. In four hours the patient's bowels moved; in four hours more he fell into a profound slumber, which lasted for ten hours, when he awoke. Although there was great soreness left, the disease had entirely disappeared."

Dr. Smith Rogers, of Michigan, says "his first experience with the dioscorea was in a case of so-called bilious colic, which had been treated allopathically for five days, and the patient given up by the physician. One dose, of five drops of the tincture, relieved the pain in a few hours, and in a day or two the patient was well."

Two other cases of colic were cured by Dr. Rogers with the dioscorea. On one occasion the patient sent for him in the night, but being unable to visit her, he sent the tincture of dioscorea, to be taken five drops every hour until the pain ceased; and two doses cured her. Afterward this patient was always able to arrest the colic with one or two doses of the medicine.

A physician in the West says: "I was called upon to visit a gentleman whom the messenger asserted had been suffering the most intense pain for some hours. From what I could learn, the case was one of enteralgia. I sent to him medicine, and added an enema and a hot fomentation, believing that by such means relief would certainly be afforded. Two hours later, I was again called upon, and implored to visit the patient, as he was supposed to be dying. So soon as I could I went to him. He was not dying, but certainly was suffering very much. The pain he complained of being constant, in his right side, aggravated at times, and as he twisted his

fingers together in his agony he exclaimed, 'It is just like that.' These pains were all aggravated by lying down. I prepared him twelve powders of the triturated dioscorein, ordered one to be taken every ten minutes until three were taken, then every twenty minutes, with orders that so soon as visible improvement was noticed, that the interval be longer between the doses. When I returned in three hours, a smile was on his face. 'The second powder relieved me,' said he, 'and I now feel almost well.'"

Prof. E. M. Hale, the author of the work on "New Remedies," says: "I once treated a gentleman for several years for an anomalous disease of the abdominal organs, of which I can never form any satisfactory idea. He had been troubled with it from early youth. The pain, for that constituted nearly the whole of the malady, appeared at irregular intervals, sometimes once a month, and lasted several days. I never prescribed anything, nor did any other physician, which seemed to give him any relief. Anodynes alleviated the pain for a time, but gave no permanent benefit. It was a crampy, spasmodic pain, commencing near the crest of the ileum, and extending to the lumbar region and hypogastrium. Physical or mental labor would bring on an attack. It would gradually increase for days, and end in an attack of vomiting; or, at other times, affect the head. When it did leave it was always suddenly. Lying on the left side and back only was endurable. My impression was that it was a spasmodic disease of the vermiform process, excited by some matters introduced into that portion of the intestine. A traveling doctor prescribed for him a medicine or compound, which gave him more relief than anything he had ever used. The chief ingredient in this mixture was the dioscorea.

I might thus go on and give you instances, both in my own experience and observation, as well as those from other physicians, but will conclude this part of my paper by simply stating what the late Prof. I. G. Jones says of the root in his admirable work on Theory and Practice, a book which I consider no Eclectic library would be complete without. He says: "The remedy upon which I rely in the treatment of bilious colic is dioscorea villosa. I have used it with entire success in all the cases that have come under my care. In one case that had been previously treated forty-eight hours with injections, fomentations, anodynes and cathartics without success, the patient was relieved in half an hour by taking one dose of dioscorea. In another case to which I was

called at night, the patient, who had been suffering severely for twelve hours, was perfectly relieved in a few minutes and soothed into a quiet sleep. It has never been known to fail, and I should rely upon it with entire confidence in all cases of this disease. The philosophy of its therapeutic action may not as yet be fully understood or clearly explained. That it is eminently adapted to the case is very certain, and that, after all, is the main point in practice."

Chemical Experiments.

Half an ounce of the clean, crude root of the dioscorea villosa was cut up, in small bits, and immersed in two ounces of cold water, for twenty-four hours. The infusion was of a light straw color, and perfectly transparent. The taste was at first sweet, but soon became slightly bitter. Litmus paper, when placed in this infusion, produced a slight acid reaction. To a small portion of this fluid was added one drop of the tincture of iodine, which immediately changed it to a dark purple color, proving thereby the existence of starch. To another portion was added the tincture of iron, which produced no change of color. By this test we show the absence of tannin. A solution of the acetate of lead was poured into a portion of the above cold infusion, which immediately caused a very heavy brown colored precipitate, thus showing the existence of gum. This precipitate is supposed to be the dioscorein, which we have designated by the No. 3.

A solution of the nitrate of silver was added to another portion, which threw down a slight light brown precipitate, proving thereby the existence of a bitter principle. The tests for gluten were applied, but with no perceivable results.

To one ounce of the clean, crude root, was added three ounces of boiling water and allowed to simmer for one hour. The liquid when decanted had an opaque appearance, from which we infer the presence of albumen; but became perfectly transparent when filtered, and of a dark straw-color, there being much more of the coloring principle in the decoction than in the cold infusion, and more of the *gum* seemed to be held in solution in the former than there was in the latter. The same tests were applied to the decoction as were to the cold infusion, and with the same results. A solution of the acetate of lead was now added to the decoction which immediately precipitated the dioscorea in the form of a dark brown powder. The liquid was then decanted and the

powder was subsequently washed in several waters to remove the lead. The powder was now dried and pulverized as may be seen by No. 4.

Half an ounce of the crushed root was tinctured in two ounces of 95 per cent. alcohol for one week, filtered and evaporated to the consistency of molasses. To this extract was added half a pint of cold water. It threw down no precipitate. From this experiment we prove the absence of resin. To this liquid was added a solution of the acetate of lead, which precipitated the dioscorein, in the form of a light brown powder. The liquid was subsequently decanted, and the residuum washed, dried and pulverized, as may be seen by No. 5.

The alcoholic and aqueous principles thus obtained from the dioscorea villosa were subsequently united and triturated; and forms the compound seen in No. 6.

Half an ounce of the clean crude root was tinctured in two ounces of strong sulphuric ether for three days. It was then decanted and evaporated; the residuum was light green in appearance, and of an oleaginous consistency; one drop of this was placed upon clean white paper, which, when dried by the fire, left a greasy stain upon the paper. From this experiment we prove the presence of an oil.

The result of our investigation with the dioscorea villosa is :

1. Alcohol and water are its true solvents.

2. Dilute alcohol would make a better tincture for medicinal purposes than absolute alcohol, because of the absence of a resinoid.

3. It imparts its virtues equally as well to cold water as to boiling water.

4. A solution of the acetate of lead precipitates more of the active principle of the root than any other agent.

5. The active agent of the dioscorea is not an alkaloid, neither is it a resinoid, but a neutral principle.

6. The analyses of the dioscorea villosa, as far as we have investigated, show its composition to be starch, gum, a bitter principle, albumen, coloring matter and oil.

ARTICLE XII.

Report of the Committee on Eclectic Medical Literature, to the New York State Eclectic Medical Society, held at Albany, January 15th and 16th, 1868. By M. M. Fenner, M. D., and Prof. Chas. T. Hart, M. D.

To the Eclectic Medical Society of the State of New York:

Your committee, appointed at the annual meeting of the society, held at Saratoga Springs, in June last, to report at the present meeting on Eclectic Medical Literature, respectfully offer the following:

They have examined the subject referred to them with some care and research, and feel called upon to state, at the outset, that they have found embarrassment in drawing the demarkation line between the various reform medical publications existing prior to the formal announcement of Eclecticism as a medical school, so as to preserve a strict fidelity to the cause, and award justice to all interested parties. Whilst at a period near half a century remote, there existed in the United States and Canadas medical sects dissatisfied with the results yielded by the prevailing allopathic practice of bleeding, purging and saturating the diseased system with mineral poisons, and offering opposition to it to the extent their degree of organization, development and means would permit, guided, at an early period, in the east by Dr. Samuel Thompson, the middle States by Dr. Wooster Beach, and in the west by Dr. T. V. Morrow and others, each issuing its periodical literature and other publications, it was not till the year 1845, or little more than a score of years since, that Eclecticism was established and formally announced to the public in Cincinnati, Ohio. Here was adopted and promulgated a broad platform of liberal and progressive medical principles, embodying the truths then attained or to be achieved by reform medicine, and constituting then, as now, the distinctive characteristics of the Eclectic medical school. Here was established the Eclectic Medical Institute, a chartered medical college, which rapidly rose to great popularity and a commanding influence, which has ever since far surpassed and still surpasses any other medical institution west of the Alleghanies in the number of its matriculants, the ability, vigor and thoroughness of its teachings, and the success of the practicing physicians it sends abroad. And here was issued the Eclectic Medical

Journal, a periodical always conducted with signal ability, vigor and fidelity to the cause, then the popular and recognized organ of the profession, and now, as then, fully commensurate in prosperity and influence with the college it has so long and so faithfully represented.

Thus Eclectic medicine, then and there founded, and formally promulgated, was the legitimate and developing offspring of these various dissenting medical sects, and though its formation did not include their exhaustive embodiment, they were largely drawn upon at its inception, and have since mostly or entirely merged into and become identified with it. In the collection of the Eclectic medical library, therefore, it has been thought consistent and proper by your committee to go back of the period at which the Eclectic or American school of medicine was formally announced, and include those publications through whose influence it was conceived, and which contributed at once to its formation, or at a later period identified themselves with it. Though the great bulk and value of the Eclectic medical library of to-day have issued directly as Eclectic works, since the founding of the Eclectic school, and even within the past score of years, it is, nevertheless, thought that strict fidelity to our cause enjoins the admission to our shelves of the older publications above referred to, which, if they are surpassed in real value, as in scientific attainment, by the more recent works, they are not further eclipsed, perhaps, than will be our most valued works of to-day, by those of a score of years hence, so rapid is the progress of our cause.

For convenience of future reference, your committee have endeavored, as far as possible, to present the periodical literature and the list of medical books, in the order of time of their first issues, and at the same time to classify the text books under their appropriate subjects.

Your committee offer the following as the list of

Eclectic Periodical Publications.

TITLES.	Date of first issue.	Date of last issue.	Estimated average circulation.	Names of editors.
The Western Medical Reformer, Worthington, O.	1836	1848	.....	T. V. Morrow, M. D.
Medical Reform, New York city	1846	1848	1,000	Wooster Beach, M. D. —— Shepard, M. D.
Eclectic Medical Journal, Pittsburg, Pa.	1847	1848	1,000	L. Oldshaw, M. D.
The Worcester Journal of Medicine, Worcester, Mass.	1846	1853	.....	Calvin Newton, M. D. Frank H. Kelly, M. D.
New York Eclectic Medical and Surgical Journal, Randolph, N. Y., Rochester, N. Y., Syracuse, N. Y., New York city	184–	185–	1,200	C. J. Kenworthy, M. D. S. Hollister Potter, M. D. Wm. W. Hadley, M. D. L. C. Dolly, M. D. Orin Davis, M. D. Levi Reuben, M. D.
Syracuse Medical and Surgical Journal, Syracuse, N. Y	1850	.....	.....	S. Hollister Potter, M. D. Dwight Russel, M. D.
The Eclectic Medical Journal, Cincinnati, O.	1849	1868	2,500	T. V. Morrow, M. D. Joseph R. Buchanan, M.D. R. S. Newton, M. D. G. W. L. Bickley, M. D. Charles T. Hart, M. D. J. M. Scudder, M. D.
Buchanan's Journal of Man, Cincinnati, O.	1850	1855	1,000	Joseph R. Buchanan, M.D.
Domestic Journal of Medicine, Boston, Mass.	1852	1854	.....	
The Anti-Mercurial, New York city	1852	1853	.....	H. Lapham, M. D. Grover Coe, M. D.
Newton's Express, Cincinnati, O.	1853	1857	5,500	R. S. Newton, M. D.
American Medical and Surgical Journal, Cincinnati, O.	1856	1857	.....	S. Hollister Potter, M. D. John Kost, M. D.
College Journal of Medical Science, Cincinnati, O.	1856	1859	2,200	John King, M. D. Joseph R. Buchanan, M.D. Chas. H. Cleveland, M. D.
Medical and Pathological Journal, New York city	1858	1859	.....	Wm. W. Hadley, M. D.
The Metropolitan Medical Journal, New York city	1859	1861	.....	H. M. Sweet, M. D.
The Family Journal of Health, Cincinniti, O.	1860	1861	.....	J. M. Scudder, M. D.
Journal of Human Science, Covington, Ky.	1860	1861	.....	W. Byrd Powell, M. D.
The Eclectic Medical Journal of Pennsylvania, Philadelphia, Pa.	1863	1868	.....	John Buchanan, M. D.
The American Eclectic Medical Review, New York city	1866	1868	.....	R. S. Newton, M. D. Edwin Freeman, M. D.
Medical tracts and annual announcements and circulars (issued from time to time)	.....	.....	200,000	Chiefly by the Faculty of the Eclectic Medical Institute, Cincinnati, O. (About 80 vols. journals.)

With reference to this periodical literature a few remarks will

be indulged. Your committee regard its usefulness in the great work of reform as of incalculable value. It has been the great medium for the elaboration and refining of ideas, thrown into it, often, by the busy practitioners of every part of a great country, crude from their observation. It is through these prints they have been winnowed and refined, through much sifting and handling, till sufficiently reduced, tried and purified for transfer to the medical text book for permanent record and preservation.

While several of the journals mentioned have had but a brief existence and limited circulation, all have exercised an influence more or less potent upon the present status of our medical school. They are each records of hopes and aspirations entertained, though not in every instance realized to the full measure of expectation.

The Eclectic Medical Journal of Cincinnati, issuing first in 1849, is but the continuation of The Western Medical Reformer, issued first at Worthington, Ohio, in 1836, and terminating in 1848, to appear the following year under the new title of The Eclectic Medical Journal of Cincinnati, thus continuing in the work of reform under Eclectic auspices. It will thus be seen to be the oldest reform medical publication, it having been issued continuously since 1836, or during a period of thirty-two years. It has ever been regarded and esteemed as *the* organ of Eclectic medicine.

That series of journals, entitled "The New York Eclectic Medical and Surgical Journal," issuing first from Randolph, N. Y., continuing under different titles and editors at different times at Rochester and Syracuse, and at a later day finding its way to the city of New York, had an existence of a number of years, and was most of the time the organ of Central Medical College. During periods of its existence it attained to extended circulation and influence, and was ably and faithfully edited and conducted, exerting a powerful influence toward spreading, popularizing and developing Eclecticism.

The Worcester Medical Journal was the organ of the Eclectic Medical College of that place, and sustained a useful career until the final consolidation of the college it represented with Central Medical College of Syracuse, N. Y.

The College Journal of Medical Science was the exponent of the Eclectic Medical College of Cincinnati, Ohio. It was ably edited and managed, and attained a large circulation and influence, which it finally united, in 1859, to the Eclectic Medical Journal of Cincinnati, O., when the faculty of the college, of which it

was the organ, was consolidated with that of the Eclectic Medical Institute of that city.

We will direct special attention to but one more periodical, the American Eclectic Medical Review, of New York city. This journal has now reached its third volume. It has attained rapidly to vigorous life, having already a widely extended circulation and influence throughout the United States and the dominion of Canada, as well as the principal States of Europe. It is edited with signal ability and vigor; and while it had its rise in connection with the Eclectic Medical College of New York city, and the reorganization of Eclecticism in the State of New York, it aims to be, what it is in fact, a publication of cosmopolitan thought and ideas, and the true exponent of Eclectic medicine and surgery for America.

The following is the list of

Eclectic Medical Books.

TITLES.	Date of issue.	No. of editions.	Date of last edition.	No. of volumes.	Authors.
Materia Medica and Therapeutics.					
The United States Eclectic Dispensatory	1851	1	.....	1	John King, M. D. R. S. Newton, M. D.
The American Dispensatory	1859	6	1864	1	John King, M. D.
The American Eclectic Materia Medica and Therapeutics	1859	1	.....	2	L. E. Jones, M. D. John M. Scudder, M. D.
The Eclectic Materia Medica	1864	1	.....	1	Henry Hollemback, M. D.
Concentrated Organic Medicines	.....	1	.....	1	Grover Coe, M. D.
Institutes of Medicine.					
The American Practice of Medicine	.....	....	.....	3	Wooster Beach, M. D.
American Eclectic Practice of Medicine	1853	1	.....	2	T. V. Morrow, M. D. I. G. Jones, M. D.
American Eclectic Practice of Medicine	.....	....	.....	2	I. G. Jones, M. D. Wm. Sherwood, M. D.
The Eclectic Practice of Medicine,	.....	....	.....	1	W. Byrd Powell, M. D. R. S. Newton, M. D.
The Eclectic Practice of Medicine,	.....	....	.....	1	R. S. Newton, M. D.
Compendium of Eclectic Practice	.....	....	.....	1	S. Hollister Potter, M. D.
Epitome of the Practice of Medicine	.....	....	.....	1	Wm. Paine, M. D.
The Eclectic Practice of Medicine,	1864	1	.....	1	John M. Scudder, M. D.
The Principles of Medicine	1867	1	.....	1	John M. Scudder, M. D.
The Eclectic Practice of Medicine and Surgery	1867	1	.....	1	John Buchanan, M. D.
Surgery.					
Hill's Eclectic Surgery	.....	....	.....	1	B. S. Hill, M. D.
Syme's Principles and Practice of Surgery	1858	....	.....	1	R. S. Newton, M. D.
Hill's Eclectic Surgery	1866	1	.....	1	John M. Scudder, M. D.

TITLES.	Date of issue.	No. of editions.	Date of last edition.	No. of volumes.	Authors.
OBSTETRICS.					
The Reform System of Obstetrics..	.....	....	.....	1	Wooster Beach, M. D.
The American Eclectic Obstetrics..	1855	2	1866	1	John King, M. D.
The American Obstetrics and Diseases of Women and Children...	1866	1	.....	1	Joseph Sites, M. D.
DISEASES OF WOMEN.					
Woman, her Diseases and their Treatment.....	1858	2	1865	1	John King, M. D.
Diseases of Women.....	1857	4	1866	1	John M. Scudder, M. D.
DISEASES OF CHILDREN.					
Diseases of Children.....	.....	....	.....	1	W. Byrd Powell, M. D. R. S. Newton, M. D.
Diseases of Children.....	.....	....	.....	1	R. S. Newton, M. D.
Diseases of Children.....	.....	....	.....	1	John Buchanan, M. D.
DOMESTIC MEDICINE.					
Domestic Practice of Medicine....	.....	....	.....	1	Wooster Beach, M. D.
The Family Physician.....	1857	2	1860	1	John King, M. D.
Familiar Treatise on Medicine	1865	5	1867	1	John M. Scudder, M. D.
CHEMISTRY.					
Gregory's Chemistry.....	.....	....	.....	2	J Milton Sanders, LL.D., M.D.
Compound Blowpipe.....	.....	....	.....	1	J. Milton Sanders, LL D., M.D.
BOTANY.					
Physiological Botany.....	.....	....	.....	1	G. W. S. Bickley, M. D.
LEXICOGRAPHY.					
Medical Dictionary	.....	....	.....	1	Wooster Beach, M. D.
Pronouncing Medical Lexicon.....	.....	....	.....	1	C. H. Cleveland, M. D.
PHYSIOLOGY.					
Beach's Physiology	.....	....	.....	1	Wooster Beach, M. D.
ANATOMY.					
A Complete Chart of the Muscles of the Human Body.....	1866	1	.....	1	Geo. K. Bagley, M. D.
SPECIALTIES AND MONOGRAPHS.					
The Human Temperaments	.....	....	.....	1	W. Byrd Powell, M. D.
A System of Anthropology	.....	....	.....	1	Joseph R. Buchanan, M. D.
Chapman on Ulcers.....	.....	....	.....	1	R. S. Newton, M. D.
Thoracic Diseases.....	.....	....	.....	1	Calvin Newton, A. M., M. D. J. M. Calkins, M. D.
Urino-Pathology.....	.....	....	.....	1	L. Oldshue, M. D.
Microscopy	.....	....	.....	1	John King, M. D.
Chart of Urinary Deposits.....	1855	1	.....	1	John King, M. D.
Inhalations.....	1866	1	.....	1	John M. Scudder, M. D.
Syphilis.....	.....	....	.....	1	John Buchanan, M. D.
Fevers and Inflammations	1860	1	.....	1	R. S. Newton, M. D.
Asiatic Cholera.....	1866	1	.....	1	E. Whitney, M. D. A. B. Whitney, A. M., M. D.
Observations on Asiatic Cholera...	1867	1	.....	1	O. E. Newton, M. D.
King's Chronic Diseases	1867	1	.....	1	John King, M. D.
Acupuncturation.....	1867	1	.....	1	A. R. Brown; M. D.
The Physician's Hand Book and Visiting List.....	.....	....	1868	*1	Wm. Elmer, M. D.
The American Eclectic Medical Register.....	1867	1	.....	*1	R. S. Newton, M. D.
SOCIETY TRANSACTIONS.					
Transactions.....	.....	....	.....	1	National Eclectic Medical Association.
Proceedings	1865	3	1867	3	Ohio State Eclectic Medical Association.
Transactions.....	1866	1	.....	1	Eclectic Medical Society, State of New York.
				64	

* Annual.

Thus has been enumerated a list of upwards of eighty volumes of periodical medical literature, and sixty-four volumes of standard medical text books. Your committee cannot forego the expression of a feeling of pride and satisfaction upon presenting this formidable collection of one hundred and fifty volumes, as the Eclectic Medical Library of the present time. They confidently assert that it is the embodiment of the real progress of the science and art of medicine and surgery for the past half century. Its origin goes back beyond the date of the earlier publications mentioned, and takes its beginnings in the dark days of medical chaos, from which dissenting voices and medical reformers arose. The practice of medicine, at the time a reformation in the science began by reformers, was but the practicing of a series of barbarities upon the disease-afflicted patient. Though much knowledge was possessed of a purely scientific nature, in a variety of the more absolute branches of the science, its reduction to practice in the healing of the sick was unsuccessful, and a notable failure. Notions of pathology had become exceedingly vague and mysterious; means of cure were reduced in the usual practice, by the refinements of science, to a few potent agents, as the lancet, mercury, arsenic, antimony and some other poisons—always highly improper agents to be introduced into a human stomach. The innumerable sovereign remedies scattered profusely throughout nature's realms were ignored, and the haughty schooled doctors, fresh from the closets of the laboratory were intolerant. It became notorious, that the intelligent nurse, with her fomentation and decoctions of herbs, was more successful and less harmful in the alleviation of disease than the educated physician. Such discouraging results were little calculated to meet the approval of a free and intelligent people. Reform physicians were produced and encouraged.

People untaught in the learning of the schools, seeing the superiority of domestic measures over scientific treatment, gave themselves to the business of caring for such patients as refused regular treatment, and though held in contemptuous disregard by the haughty schoolmen, their labors, unskilled and inartistic as they were, became notoriously more successful than their learned despisers in the management of many diseases. This movement, invited and even forced upon society, by the notorious inefficiency for good of the profession, received the favor of many people,

gradually became organized into various sects with men of more or less ability at their heads, as the Thompsonian, headed by Dr. Samuel Thompson, Botanic medicine headed by Dr. Wooster Beach. But it was not till the year 1845 that a thorough and permanent organization of reform medicine was effected in Cincinnati, under the auspices of such able and enterprising leaders as Professors T. V. Morrow, L. E. Jones and others, whom it had pleased providence to raise up and place in the reform ranks. A broad platform of medical principles was here adopted, the term *Eclectic* chosen as the appropriate designation of the *Reform School*, and the *Eclectic Medical Institute*, the great *alma mater* of reform medicine, established.

In the organization of the *Eclectic Medical Profession*, and the establishment of the *Eclectic Medical Institute* of Cincinnati, it was sought by able men—men who had been educated at the regular Medical Colleges, but seeing the wonderful superiority of reform treatment of disease, had thrown off the shackles of prejudice and embraced its system of practice, to build up a young and energetic American school of medicine in consonance with the spirit and stage of progress of American institutions; one that should be alive to the requirements of the times, that should throw off the lumbering and repugnant aristocracy of the European schools as well as of their offspring, the then existing schools in America, which were wholly imported institutions in spirit and in letter; one that should not disdain to acquire knowledge of valuable facts and experience from the lowest sources, at the same time that it should aspire to the highest; one that should not be puffed up with self-conceit; one that should not be bowed down and oppressed by the adoption, unquestioned, of all the accumulated dogmas of the past; one, in fine, that should court investigation and demonstration in medicine as in other branches of science; have progress, advancement as its motto, and seek to explore the vast, rich and varied vegetable kingdom indigenous to the land. It was sought to adopt and combine the learning of the schools, as far as that learning was absolute, in the branches of anatomy, chemistry, physiology, pathological anatomy, obstetrics, surgery, and materia medica, with the reform general pathology, materia medica and practice of medicine or therapeutics. It was sought to investigate, sift out and incorporate from the old into the new, as well as to go into fields yet unexplored and make them contribute of their abundance to the perfection of the system.

They sought also to stir into activity a profession puffed up with ostentatious learning and lazily settled into a routine practice that yearly wrecked more constitutions and carried more people to untimely graves than all the evils of war, pestilence and famine combined. They sought to stay the reckless career of red-handed scientific murder. Satiate with scholastic learning, self-conceited beyond hope of redemption, it was an impossibility to teach the profession reforms. The old adage that "None are so blind as they who will not see," is as true as it is old. The examples of the great Hervey and Jenner, and other great names who had gone before them, held out little inducement to begin a labor of that kind within the profession. It was therefore sought to force the profession from their heroic and sanguinary measures of human destruction, by teaching the people that all the "ill of flesh" could be managed successfully by gentle sanative measures, and thus compel them to desist from the use of their pernicious agencies by lack of victims.

Twenty-two years ago, therefore, the Eclectic or American system of medicine organized upon the following broad platform of principles:

"1. We deny the papal infalibility of the profession.

"2. We deny that it is impossible to produce satisfactory results without the lancet.

"3. We deny that mercurials are ever necessary.

"4. We deny the propriety of using any injurious remedies.

"5. We deny that a physician should be allowed to lose more than 2 per cent.

"6. We deny that we know enough about the materia medica.

"7. We deny that the functions of the brain should be omitted in our systems of physiology.

"8. We deny that physicians should be the last to learn new truths."

If we add to this platform the two following planks—

"9. We deny the commonly received doctrines of pathology.

"10. We believe in the specific action of medicine, and in direct medication"—

We shall have the principal ideas elaborated and established in the Eclectic medical library of to-day.

Within these volumes will be found established all those important truths developed by the investigations of reform medicine since the reformation in that science began.

Its investigations in the department of therapeutics have developed the specific action of a large number of medical agents upon diseased action, thereby affording direct, easy and certain relief where only circumvention, difficulty and uncertainty have heretofore obtained.

Its investigations in physiology have developed truths with reference to the action of the brain and nervous system, and with reference to the human temperaments, that have taken a first place in science, and form bases for important alterations in the practice of medicine, as well as the habits and customs of society.

Its investigations in general pathology have demonstrated the important fact that disease is not an *entity per se*, not a thing foreign to the system, that by some chance means has entered it, and must, by strong and noxious drugs and heroic means, be driven out. It is rather a condition of the system, or a portion of it. As seen by the observer, it is but the manifestation of an effort the system by its nature or its constitution puts forth for the repairs of injuries done to its tissues. These injuries are either apparent, following upon accident, or they are occult, invading the system through the blood into which they have been introduced along with the atmospheric air we breath, as in the case of zymotic diseases and the exanthemata. And the rational treatment adopted is simple, as it is strictly scientific and gratifyingly successful. The physician is called upon to support the system and maintain it in its integrity, instead of tearing it down as of old, and aid nature in the work of repair and restoration to health in her own way, instead of "kicking nature out of doors," and substituting pernicious agencies devised by man in her stead, as the old system of practice would have us do.

It has demonstrated, and every day continues to demonstrate to the world in actual practice, that by its judicious system of medication, based upon its improved system of pathology of disease, and aided by its numerous new remedies which have been discovered and brought into use principally from the vegetable kingdom, only a trifling per cent. of patients suffering from acute diseases need fall victims to an untimely death, and that much acute suffering, and many chronic ailments rendering life uncertain and painful, and once thought unavoidable, may be radically healed, and the sufferer restored to the enjoyment of his natural existence.

To aid in the accomplishment of these results it has introduced into its Materia Medica upwards of fifty new remedies, before

unknown or unused by the profession, and substituted them for the poisonous drugs heretofore in use. Many of these new remedies are of the utmost importance in the proper management of disease. It has abandoned all the heroic and pernicious drugs and measures of the old systems, as mercury, lead, arsenic, tartar-emetic and the lancet, and uses nothing positively hurtful to the human constitution in the treatment of disease, so that if, per chance failure to cure attend a given case, it is not, at least, made worse for the undertaking. No wrecks of humanity stalk about as the results of Eclectic treatment.

It has had the effect to force old school practice from many of its sinful ways. Who now-a-days hears of a patient being bled? Where has mercury been used to salivation of late? Who has seen the bloated faces and suffused eyes resulting from the lavish exhibition of arsenic? Formerly these appalling results met the eye at every corner of the street. Scarcely anywhere can they be found at the present time, save within the secluded wards of the hospital, where dark deeds may be done secure from the condemning public eye. No; Eclectic medicine has taught that destructive measures are unnecessary and pernicious in the treatment of disease, and the people refuse to be so treated by allopathic physicians. The allopathic profession have therefore been forced to abandon their old treatment of disease by reform medicine, their much-ado cry of "change in the type of disease" to the contrary notwithstanding, or to employ it sparingly and by stealth.

They have incorporated many of the valuable remedies brought forward by the reform physicians into their Materia Medica, sometimes giving credit therefor, at others most disingenuously forbearing to make any mention of their origin. Other equally valuable remedies they still stubbornly refuse to recognize. Convinced, perhaps, of their intrinsic worth and value to their trusting, confiding, suffering patients, they yet have doubts concerning the respectability of their origin sufficiently grave to overbalance all considerations of justice, humanity, good policy.

Like the Philadelphia professor who remarked to his class that lobelia was a medicine oftimes of the greatest service in the treatment of disease, but unfortunately it was freely used in the practice of quacks, and he felt obliged to caution them to be chary how they had to do with it! Some of our remedies however have never been so loudly praised as by allopathic pens in allopathic journals and books. Probably more has been written

and said to the credit of the one concentrated Eclectic remedy Podophyllin by allopathic physicians in Europe, many of the most liberal minded and able of whom use it freely as a substitute for mercury, having entirely discarded that poisonous drug from their practice, than by the Eclectic branch of the profession itself, and we should hardly exaggerate in saying that tons of the agent have been ordered from our Eclectic manufacturers to supply the European market. Yet there are hundreds and thousands of allopathic physicians within easy access of these extensive manufactories in our own country, who have never as yet tested the agent in actual practice, but continue on, as of old, dealing out their Sampson doses of calomel and blue mass, so chary are these respectable old gentlemen of tarnishing their good name. Said the late Dr. Ira Warren, of Boston, an allopathic physician of much celebrity, a member of the old school Massachusetts Medical Society, a man whose family name stands justly at the head of the allopathic branch of the profession in America, and who was much above the mediocrity of his professional brethren in point of attainments, progress and liberality, in a recent edition of his "Household Physician," a work, by the way, that every Eclectic physician should have in his library, respecting Eclectics, their standing, and the value of their labors; and he says so many good things that we quote his entire article, which is brief:

"There is a large and growing class of physicians called at first after the founder of the school, Thomsonians. Subsequently they were generally known as botanic physicians. Now they pass under the title of Eclectics. These men directing their attention at first chiefly to cayenne and lobelia, have gradually extended their zealous researches over the vegetable kingdom, and have gathered much information worthy to be preserved. These researches have revealed a sadly neglected duty on the part of the old school practitioners, and in 1853 drew from the committee on Indigenous Botany, appointed by the American Medical Association, the confession that our practitioners generally have been extremely ignorant of the medical plants even in their own neighborhood; and to this fact the committee attributed it that the Eclectic physicians had in so many instances supplanted the regulars in the confidence of the people. The education of this class of practitioners has gradually risen, year after year, until they have several medical schools where students are well instructed in the principles of medicine by men of real ability. This is particularly true of

the school at Cincinnati. They have also a literature of no mean significance, especially in the department of Materia Medica. The list of remedies they have given to the world, drawn from our home plants, are a boon of no small value. I regard them as equal in value to all we were previously in possession of from the vegetable kingdom. The podophyllin and leptandrin, as substitutes in most cases for mercurials can hardly be too highly prized. And yet it is mortifying that the remedies which these men have given us are, by hundreds of our old school practitioners not even known by name, and where known, generally not honored with a trial. King's American Eclectic Dispensatory, a work of 1300 pages, in which they are well described, is almost unknown among us. Aside from the copy in my own library, I do not know that one is owned by any member of the Massachusetts Medical Society in Boston. I consider this a disgrace, for however learned a man may be, he is not fully equipped as a practitioner, until he is acquainted with this class of remedies."

Had the learned and generous author just quoted, Dr. Warren, been himself more conversant with Eclectic literature, he would hardly have withheld special references also to the magnificent volumes on Institutes and Practice by Jones and Sherwood, Newton and Scudder, and to that great work of works, that has been justly styled a library within itself, King's Chronic Diseases, a volume of upwards of 1,600 pages, compact, digested, valued—not a line too much, yet complete—the ripe fruit of a long life in active medical reform.

Your committee will not take the time for special reference to works of special interest, believing all intelligent Eclectics to be possessed of these valued publications.

Upon the literary merit of the Eclectic library your committee will also be brief, remarking generally that they believe it compares favorably with a like quantity of that of any other medical school. While in the earlier publications, issued during the infancy of the cause, a hurried and somewhat crude style is sometimes apparent, the later works generally bear the indications of having been prepared with much care and thought. They are written in a style as easy and flowing as would comport with the strictly scientific character of the production, clothed in words well selected, and skillfully and compactly sentenced. In fine, in literary execution, as in value of matter, they are a success.

In conclusion your committee, having no motives other than the good of the race at heart, would briefly, but earnestly and forcibly, recommend the Eclectic Medical Library to the medical profession. Sufficient evidences have been received from those who have always opposed its progress, to leave no doubt of its real intrinsic value. The extraordinary success of the Eclectic treatment of disease, long since made patent to the world, is based upon the precepts and teachings therein embodied. It is the fruit of a generation of zealous, faithful seekers after truth. It has been achieved by toil, self-sacrifice, much investigation and laborious research. It is now a developed fact, and is accessible to all, of whatever shade of tenets. That it may be appropriated, fitly acknowledged, and turned to the permanent benefit of mankind, is what your committee bespeak on behalf of the Eclectic medical literature.

ARTICLE XII.

Educts versus Products of the Vegetable World. An Essay presented at the Annual Meeting of the Society, January 16, 1868. By James Day, M. D.

All matter that was, is. Man can mould, preserve, or change, but can neither, create nor destroy. The food of man, animal or vegetable, is the production of the plant. The same source will supply all necessary medicinal agents.

In the creation of matter (vegetable), the all-wise Being has made it subject to the universal law of all organized existence, reproduction, and proliferation by assimilation. The vegetable, under favorable circumstances, is constantly adding to its substance, ejecting only those atoms which cannot be assimilated. Once combined they may undergo change in their molecular arrangement, through the action of the vital force of the plant, resulting in the production of the various "proximate principles," but they are not again eliminated.

Vegetable growth is due to cell proliferation, each cell possessing the independent power to assimilate new matter; from this assimilated matter new cells are formed; they, in their turn, producing innumerable other cells. The food of the plant consists principally of carbonic anhydride ammonia, water, and nitric acid, with a small proportion of saline matter, varying with the nature of the plant and soil.

These compounds are furnished principally by the atmosphere being carried to the soil, dissolved in the moisture of the atmosphere or rain; it percolates to the fibres of the roots, dissolving in its course the saline particles, and is absorbed and carried by capillary attraction through the vascular system of the plant to every point of its structure. Then and there commences the beautiful process of elaboration, or building up of the more complex forms of matter, from the debris or disintegrated particles of the animal economy, the results of fermentation, putrefaction and decay. The plant thus becomes the laboratory of nature, and its principal operation, deoxydation.

It receives (H. O. 3), (H. O.), (C. O. 2) and a small amount of earthy salts. These products are elaborated principally into nutritive matter; a smaller proportion into non-nutritive or med-

icinal. These elaborated atoms of matter have been termed "proximate principles," and would appear to take their type or build from sugar, fruit sugar being formed by the partial deoxydation of carbonic anhydride and water, thus: 12, (C. 02, + H. O. —02)=C. 12, H. 12, O. 12, and from it all the varieties of vegetable organic products may be elaborated by the addition, subtraction or substitution of atoms of water, ammonia and oxygen.

Witness the easy transition of gum, starch, dextrine and cellulose or lignin into sugar, and *vice versa*. The most important medicinal principles are the resins and their combinations, alkaloids, vegetable acids, fixed and volatile oils, and neutral principles,—some are pure hydro-carbons, some oxydized hydro-carbons, others carbo-hydrates, and the alkaloids in every case containing nitrogen. Their atomic grouping is more complex, and therefore less stable than that of the nutritive principles, when removed from the influences of the vital power of the plant.

Most of them are chemically combined with some of the nutrient principles (gum, sugar, starch, albumen, &c.), and many of them with one another.

Nature, in her laboratory, so perfects these combinations that they are all soluble in the fluids of the plant, and can be in that manner carried from point to point, to assist in the formation of its various tissues.

It is in this combination, therefore, that these principles are best presented, in the condition most easy of assimilation, by the animal economy.

We find in the juice of many medicinal vegetable agents, combined harmoniously in solution, alkaloid, acids, resins, volatile oils, and astringent principles.

Let them, however, after extraction from the plant, be separated from their native combination (or more properly decomposed), and we find it impossible to recombine them, or even dissolve them separately, in the same menstrum by which we obtained them; as samples we might name opium, Peruvian bark, hydrastis, rhubarb, gelseminum, &c.

It is an established fact that opium, Peruvian bark and rhubarb owe much of their activity to the astringent principle in combination, and there are few who hope to obtain the best effects of these agents from their alkaloids, resins or acids alone.

They are readily obtained in solution (together) by carefully extraction, as for example, the aqueous extract of opium, or the

fluid extract of bark; and yet, separated from their native combination, we find it not only impossible to recombine them, but that they are directly incompatable—example: any alkaloids with tannin.

How many of our vegetable agents containing bitter principles, owe their tonic properties to the combination of that bitter, with the aromatic principle?

Who would attempt to check diarrhœa with the isolated cathartic principle of rhubarb?

Nature has reserved to herself the right to modify, control and perfect her productions, and I hold that he who applies chemistry to organic pharmacy has split on a fatal rock; until we can prepare and exert a new chemical re-agent, namely, vital force, the less we interfere with the productions of nature the better they will fulfil indications.

Having seen that these principles are combined, and held in solution by the fluids of the plant for their more ready assimilation, is it not evident that in this form they will also be the more readily assimilated by the animal economy.

And when we examine the complexity of their build, and the ease with which their composition is changed, and the extent of change that can be produced by one atom of water; and that these changes are the more readily produced in the presence of air, moisture and heat. It behoves us to discover the best mode to obtain them as educts (that is in their native state) or combination.

It is evident that this result cannot be obtained, in form of powders: also, that the precipitated and re-dissolved principle, will not be presented as an educt.

They can only be obtained (in a concentrated form) as fluid extracts prepared by the most scientific method of displacement without heat, and with a menstrum that will not destroy the combination, but preserve it as obtained. The menstrum should correspond in chemical composition to the principle to be obtained. This is readily illustrated in the case of podophyllin. The active principles of podophyllin peltatum, are readily extracted as educts, by the action of diluted alcohol, or even hot water, although the watery infusion will deposit the resin, owing to its superior affinity, for the gum, &c.

A tincture made with moderately dilute alcohol, will retain the resin in solution as long as one made with strong alcohol, and at the same time will not destroy the affinity of its native combination.

We also know that after the precipitation of the resin from any solution, and reduction to dry powder, that it becomes absolutely insoluble in the same menstruum, and part of it, in any menstruum.

It is the same with leptandra. Does not this account for the irritating proprieties of podophyllin? it cannot be dissolved, or only in part, and does its work by irritation of the mucous surfaces with which it comes in contract. Does not this irritation account for the griping and other distressing effects attending its administration? How much more easy of digestion must it be in its native state, when it is readily formed into solution by water or alcohol in dilute state.

The podophyllin of the shop is not the podophyllin of the podophyllin peltatum; it is not an educt, but a product, lowered and changed, (at the expense of part of its hydrogen), by oxydation, precisely as the volatile oils become resin in the dry root by age.

Experiment has proven, that a carefully prepared fluid extract of podophillum and leptandra, combined with the syrup of rhubarb and potassa, or alone, will act with comparative ease without nausea, even in hydragogue doses. This effect cannot be produced with podophyllin in any combination of art. Most resins are more readily soluble by the aid of alkalies, and are precipitated by acids.

Many manufacturers use hydrochloric acid to precipitate the so called podophyllin—it meets this same acid in the stomach, and it is not probable it will assist in its solution. The alkali neutralizes for a time the acidity, and allows the resin to be absorbed without precipitation.

The simple contrivance, the percolator, properly understood, and carefully manipulated, will do more towards the extraction of vegetable principles, unchanged in their relations, than any other method yet contrived. These educts of nature are what we need as remedial agents.

The more simple the means that can be employed to obtain them concentrated and uniform in quantity and quality, the better the result. Nature's laboratory has perfected them for our use; this precipitation and resolution, distillation and purification, as it is called, is detrimental to their activity. Uniformity of strength can only be obtained by analysis.

Exsection of upper jaw bone,
palate & cheek bone of right side.
Dr. E. Freeman.

ARTICLE XII.

Exsection of the Upper Jaw Bone and Palate Bone with part of the Cheek Bone of the right side. By Edwin Freeman, M. D., Professor of Anatomy of the Eclectic Medical College of the City of New York. Read at the Annual Meeting of the State Society, January 16, 1868.

Mr. President and Gentlemen—The following description of an operation performed by me may be of interest to this society, as I am a member of your body, and it may refute any assertion of our opponents, that Eclectics cannot be good surgeons, as they pay no attention to anatomy, and are obliged to go outside of their ranks to have delicate operations skillfully performed. This operation cannot be performed without a clear and exact knowledge of the anatomy of the part, and of the best method of operating, in order to be successful. Indeed, it was considered so formidable that it was not proposed until 1820, by Mr. Lizars, of Edinburgh, who then described at length the plan, but did not operate until 1829. Dr. Alexander W. Stevens, of New York, took away a part of the bone in 1823. There have been few operations in which the exsection of bones of the face have been more extensive than the present one, excepting where both maxillary bones were removed. In a few, the excision was made through the zygomatic process of the malar bone, instead of the malar bone itself, as I performed it; but I saved the prominence of the cheek, and at the same time cut through healthy bone, which was all that is in this case desired. I used the cutting pliers, which I think much preferable to the chisel and mallet, although so much has been written about the crushing of the former through the bone as being so appalling. I also administered chloroform, and owe part of the success of the operation to its use. I would always advise its use whatever may be said against it, if proper precautions be used to allow the blood to pass down the throat and not into the larynx, by placing the head on a low pillow and quickly stopping the bleeding.

About the middle of September last, Professor W. W. Hadley called on me in consultation, on a case which proved to be one of great interest. A lady, Miss T——, of Essex county, New Jersey, aged sixty-two years, had consulted him concerning a swelling of the right side of the face, and a tumor appearing on the right ante-

rior nares. The face below the eye was rounded to a level with the cheekbone, which was naturally prominent, and the opening of the orbit of the eye was narrowed in the vertical diameter, by the pressing upward of the floor of the orbit. There was a constant discharge from the nose, and also from an opening which had been made by a surgeon, into the antrum, through the alveolus of the second molar tooth. She said that the face had been more swollen, but had discharged through the nose and the swelling had subsided. She was unable to breathe through the nose. On a close examination it was discover that the tumor in the nose proceeded from the right antrum, seemed to be about the size of an almond in the nose, was very vascular, and bled on the least handling. It was not movable, and seemed quite firm in structure. On probing the antrum through the gum it was found to be expanded, but not completely filled out by the tumor at its lower part. There was no protrusion of the tumor into the posterior nares. My diagnosis was, that it was a malignant or cancroid polypus of the antrum, developed from its lining membrane, probably near the opening of the nasal cavity, protruding into that cavity, and occupying the antrum; that the growth and its presence in the antrum give rise to the great purulent and muco-purulent discharge which had taken place, and that this had caused the great distension of the cavity, until it had found a place of exit; but latterly the tumor by its growth was rapidly filling up the space. With this the Professor agreed. My advice being then asked as to the possibility of removing it by or without an operation, I advised an operation and subsequent treatment as we treat cancerous growths elsewhere in the body, when there are evidences, after removal, of an appearance of the disease in the wound before it is healed. I would operate to reach the origin of the disease in the antrum, which could not be reached in any other way. I therefore advised that the antrum be opened through the anterior wall, and that the further steps of the operation be controlled by the condition of that cavity, and the size and attachment of the tumor. She had seen several surgeons of this city, of whom Dr. Parker advised that it be not operated on; Dr. Sands, that it be operated on. Dr. Hadley and myself having agreed that it could be removed, and that it could be completely eradicated by that and the after treatment, as the cervical glands were not enlarged. The lady, and her brother who accompanied her returned home; October 9 they came to the city, she being prepared to remain

until she was well. The tumor had, in the meantime, by growth and pressure, produced closure of the ductus ad nasum, and consequent distention of the lachrymal sac, which opened externally, resulting in fistula lachrymalis of the right side.

The patient was of the sanguine-bilious-encephalic (nervous) temperament, slender yet not feeble, and seemed to be possessed of considerable vital tenacity. She was anxious to have the tumor removed, and seemed willing to risk the chances of a failure for the probability of a complete recovery.

Oct 14th, assisted by Profs. Hadley and Allen and Dr. Comins, I proceeded to operate, the patient having abstained from eating her breakfast. The bed was prepared so that her head would be on a level with the rest of the body, to allow the blood to pass into the pharynx and be swallowed, rather than allow it to pass into the larynx, as it would be likely to do in an upright posture, and suffocate the patient. The chloroform was carefully administered by Prof. Allen, and largely mixed with air by holding it well away from the mouth; but owing to the absence of her teeth, the lips were inclined to close tightly, and not being able to breathe through her nose, she was inclined to not breathe at all, especially after she began to be a little anæsthetised. She was, at different times, aroused by rolling and calling loudly to her to inhale the vapor, and at last we had the satisfaction of seeing complete anæsthesia established, which at one time I almost despaired of. My first and exploratory incision was made from the internal angular process of the frontal bone down along the border of the ala-nasi through the lip, cutting into the mouth and dissecting the outer flap upwards and outwards towards the eye and temple. The anterior wall of the antrum was so soft and lardaceous that I cut through it with my scalpel. On passing my finger through the opening thus made into the antrum, I found the entire bone so diseased and covered with polypi that I concluded at once that it was not safe to perform any mincing operation, and that the whole bone should be taken away, for which possibility I had made every preparation previous to commencing. I then made a second incision from the lower border of the first to the malar bone, avoiding the duct of steno. The flap was dissected up, and the lower border of the orbit, malar bone and frontal process of that bone were exposed. The lateral cartilage of the nose was detached from the nasal process of the superior maxillary bone, the velum pendulum palati detached from the posterior border of

the palate bone and buccinator muscle and buccal mucous membrane from the bone, as far back as the posterior surface of the malar process of the maxillary bone. With strong cutting pliers, I then cut through the malar bone into the orbital cavity; then through the nasal process of the superior maxillary bone and lachrymal bones, by passing the blades of the pliers into the nasal and orbital cavities; then, passing them into the nasal cavity and mouth, I cut through the maxillary and palate bones by the side of the septum nasi, completely severing the bones from their connections, with other bones, excepting the pterygoid process, from which it was removed with a little force.

After a little further dissecting of the soft tissues, part of the malar bone, and the superior maxillary and palate bones were completely detached and taken away, leaving the eye resting on nothing but its soft bed of fat. The whole mucous surface of the antrum was covered with a mass of polypoid growths, of the fibro-vascular variety, and changed in structure, as indeed was also a part of the osseous wall. After removal of the bone, there were some of those growths found attached to the middle turbinated bone, which were extirpated. There was profuse bleeding in the first stages of the operation, but it was all arrested by sponging with cold water. No large arteries were cut, the facial being quite insignificant where it was cut, after giving off the superior coronary to the upper lip. The internal maxillary, where it enters the maxillary bone, was torn and not cut, and did not bleed any. The flaps were then drawn down, the cavity filled with sponge, and the wound closed with five twisted and nine interrupted sutures. A wet cloth was applied to the side of the face, and in the evening adhesive straps were applied to retain the parts in opposition, and take the strain off the sutures. Dilute arnica tincture was then applied, with a cloth, and a wet compress. She knew nothing of the operation until the last sutures were being inserted, and suffered none. The anæsthesia passed gradually off, she was supported by sherry wine and beef-tea, and rallied finely. She was fed with slop food; and with good nursing gained each day. On the third day I removed the sponge, and applied lint and water dressing, after syringing the cavity out well, and on the fifth day removed the straps and sutures. The wound had united throughout its whole extent, except where the fistula lachrymalis had been, and over the cut malar bone. I reapplied the adhesive plaster and wet dressing, and this was continued until

the wound was all firmly healed. The cavity of the wound was daily syringed and the dressings reapplied, and it gradually contracted, filled up by granulation of the surface, and its walls soon became firm and hard like the hard palate of the mouth. The case is now under Prof. Hadley's care, who will make such further applications as will seem necessary, as there is some indications of a reappearance of the disease. The lady is strong, goes out daily to take the air, and seems well pleased with the result so far.

In making the first incision, I intended, if the case would admit of it, to exsect merely the anterior portion of the superior maxilla in the manner described by Prof. V. Mott, in the American Journal of Medical Sciences, Philadelphia, 1843, new series, vol. V., pages 87–91, and remove the tumor; thus saving as much of the bone as possible. Further progress in the operation convinced me that the entire bone must be extirpated.

With regard to the policy of performing such an operation for a malignant tumor, Dupuytren advocated the extirpation of a fibro-vascular tumor of the jaw, for its rapidity of growth would soon destroy life. Mr. Liston condemns it in all encephaloid diseases. Prof. Gross operated for exsection of the upper jaw in seven cases, two of which entirely recovered, and one of those possessed all the physical properties of encephaloid. Of the others, one died from pneumonia, one from dysentery, and two from a recurrence of the disease; making four fatal cases in the seven. Mr. Henry Smith, in his work on operative surgery, makes the ratio of mortality, one in four cases. Prof. Gross estimates the ultimate result in eleven cases operated on by Lizars, Syme, Robert, Scott, Earle, Guthrie and Hetling; only one was completely successful. With even this ratio of mortality, if the patient has naturally a good constitution, I think an operation would be warrantable.

The entire superior maxillary and palate bones were first successfully removed by Gensoul, of Lyons, on the 26th of May, 1827; Mr. Syme, of Edinburgh, also operated on the 15th of May, 1829; and Mr. Lizars, of Edinburgh, operated successfully on the 1st of August, 1829. Various partial exsections of the bone had been made previous to that time.

There is no danger of the patient strangling from blood trickling into the larynx, partially insensible to its presence from the effects of chloroform, if the patient's head is placed on a small pillow as low as the body; while anæsthesia destroys half the horrors

of the operation. In this case the scar by the nose is scarcely visible, while that upon the cheek is not very bad. The presence of part of the malar bone makes the depression in front of it more noticeable, but it would not be observed were it not for the scar, and that can be concealed. An artificial hard palate can be fitted as a part of the plate for her teeth, and when that is in, her deformity will be hardly perceptible.

ARTICLE XV.

Report of Cases and Statistics by L. Stanton, M. D., of Copenhagen. Presented at the Annual Meeting of the Society, Jan. 16, 1868.

Case I. Gun Shot Wound.

On the 7th of December, 1862, I was called to see Mr. H. Hufcut, of Harrisburgh, Lewis county, who had accidentally shot himself half an hour previous to my arrival, with a Colt's revolver. The ball entering about midway between the cardiac orifice and umbilical region or navel, passing to the right and upwards, and in its course touching the left lobe of the liver, passing through the diaphragm, and the lower portion of the right lung, and lodging between the ribs, three and a half to four inches to the right of the spine.

There was great prostration of the nervous system from concussion, as it afterwards appeared, although it was at first apparent the patient was dying from internal hemorrhage. The cold clammy sweat, vomiting, hiccoughs, gasping for breath, no pulse, in fact all the symptoms indicating speedy dissolution.

I waited a little, infering that nothing could be done; but seeing no change since my arrival, made an effort to assist the system to rally, by giving an anodyne and stimulus, and applying stimulating lotions and washes to the surface and extremities. After persevering efforts for some hours, the pulse became perceptible, and the stomach more quiet, when I began to see that my first prognosis was not correct. But that it was possible for the man to live. The pulse was just perceptible for twelve hours or more, after reaction commenced, and during this time they were but just a tremor, so very quick and feeble were they. The ball could be felt lodged as above stated between the ribs, and after reaction was pretty well established, I made an incision to the ball, and with forceps extracted it with great care, the perforated plura membrane only preventing the ball falling back into the cavity of the chest. Both wounds healed kindly where the ball entered, and where it was extracted, under the application of simple salve. The stomach became quiet in from twenty-four to thirty-six hours, so that a mild cathartic was administered, which, together with enemas, procured favorable movements of the bowels.

There was perfect stranguary in this case, or inability to urinate, for several days; but there was no difficulty in relieving the patient in this regard, by cathaterizing. He was kept constantly under the influence of diaphoretics, diuretics, nervines, and occasionally an anodyne and mild cathartics.

The patient became very yellow, extremely so, appearing not unlike the jaundice, which to my mind was conclusive evidence that the ball penetrated the liver in its course; hence the disturbance and obstruction of that organ, which, by absorption of the bile, produced the yellow skin.

I began almost to doubt my diagnosis again in respect to the ball touching the lung, in the absence of coughs, when on the seventh day he began to cough, and soon raised quite solid, black, tarry appearing substance, but which soon changed to pus, and gradually into a healthy expectoration, which, together with the cough, wholly subsided after a few weeks. He continued to convalesce and, after fifteen to twenty days, was treated with mild tonics and nervines, so that at the end of six weeks he was discharged cured.

Here allow me to remark, that Mr. Hufcut was opposed to the war, as unnecessary, or unjustifiable at the commencement, and up to this time. But I remarked to him, that as he was *bullet proof* he ought to go and help the "boys in blue." And I am happy to say he did go the next year, served to the end of the war, and came out all right.

Case II. Malformation.

The subject of this case was born at the village of C——, Lewis Co., N. Y. Dead born, full grown, sex, male. The face was natural, too, and including the eyebrows and ears, but the whole cranium and brain was wanting, even the base of the brain, and spine above the first or upper lumbar vertebra. There was no neck, but the face seemed to sit on between the shoulders, and the sloping surface from the eyebrows down to the lumbar vertebra was covered with a transparent film or membrane.

The limbs and other portions of the body were natural, except the abdomen, which was unusually large.

Case III. Malignant Erysipelas of the Scrotum.

I was called to see, in connection with Dr. E. Allen, Mr. M. W——, of Copenhagen, N. Y., in April, 1867, aged about seventy.

Found him prostrated upon his back, as above represented, for he could not be put or remain in any other position. Symptoms, moderate general febrile action, for he had been kept in a mild perspiration previous to my seeing him; tongue white, pulse strong, 80 to the minute, not much pain, but the scrotum was enormously enlarged, about nine inches in length and six in diameter, deep red, and spotted with green and yellow vesicles in places; urine scant and bowels inactive.

Treatment—Alterative doses, of diaphoretic powders and lobelia inflata, and podophyllin, to act gently on the bowels, giving also pretty freely of a decoction made of equal parts of polygonum punctatum and mentha veridis, for the first and second day, and applied the following unguentum or mixture locally, with the feather part of a quill.

2 oz. compound tincture of gum myrrh.
1 oz. tincture of lobelia inflata.
1 oz. sweet oil.
1 oz. sanguinary canadensis.
1 oz. oil pinus canadensis.

Add cretæ preparatæ until it is about the consistency of cream; shake well before using.

The preparation was applied every hour, as before stated, for six hours; then every second and third hour, and less frequently as the disease abated, keeping the parts constantly wet with a compress of lobelia tea cool.

The above preparation never fails to arrest local malignant erysipelas, with proper constitutional treatment, which, in some cases, require a thorough emetic of lobelia, in conjunction with stimulants to cleanse and neutralize the virus in the system.

Mr. W—— recovered rapidly under the above treatment, without the emetic, and in one week was discharged, cured.

I was called, years since, to see just such a case, in the town of Champion, Jefferson county, but gangrene had set in and I could not arrest the disease. About the same time, I was called to see S. Hodsall, jr., of the same town, with this disease located in the hand, which was wholly covered with vesication, from one-fourth to one-half an inch thick, extending above the hand, and the arm greatly swollen, with a red blaze extending to the pectoral muscle. In this case the disease was not checked until the emetic of lobelia was given, which produced a perceptible change in arresting the progress of the disease. Mr. Hodsall recovered, but

while attending him, his uncle, Solomon Hodsall, remarked to me that, "you cannot save my nephew, doctor, for I am one of the first settlers of this town, and have known fourteen just such cases; every one died, and you cannot save him."

PULMONARY CONSUMPTION AND TYPHOID FEVER.

I do not propose to write at length, in regard to these prevailing complaints, but simply to call your attention to them, more particularly the latter, and to furnish some statistics in relation thereto.

Phthisis, or pulmonary consumption, is annually claiming its victims by thousands in this country. It has been the most fearful and dreaded scourge, so that every shop and store is crowded with quack nostrums and patent "*cure alls*" for every consumptive. But, in the Eighteenth Senate District, for the past six years *five* died of Typhoid fever, to one of consumption. Seventy-five per cent die of this disease (fever) under allopathic treatment in the counties of Lewis and Jefferson! Do you start with astonishment, and inquire, why is this? Sir, the wonder is they do not *all* die when treated with large quantities of *poor* whisky and brandy, quinine, calomel, &c. From one to three pints are given to adult patients in twenty-four hours. More fever patients recovered under the old antiphologistic plan of treatment, than do under this stimulating course. They stimulate with the wrong agents. Large does of quinine and spirits dry the skin and affect the brain, an unavoidable result in fevers, except of a very low grade.

A very celebrated surgeon and physician of this Eighteenth Senate District, recently treated a young man of eighteen summers, of respectable family, and a picture of health when taken sick, some six weeks previous to his death. He was not bathed, nor did he have his under-garments changed for the first five weeks. The doctor advised not, and no ablutions at all, but his neck was kept wet and saturated with spirits of turpentine, "to keep the disease from going to his head," as the doctor said to the family. The patient was delirious most of the time, yet milk and beef-tea were crowded down him to the utmost. Oh, shame on such nonsense! Boasted science of a thousand years, where art thou? *Common sense*, where, oh! where, art thou fled? Sir, I can hardly find language to express my disapprobation and horror of such treatment, more appropriate than the language of Professor Chapman. "*It is horrid, unwarrantable*, murderous quackery."

And what do Eclectic practitioners say in reference to such treatment, and how do their notes in practice and success compare with the foregoing? Why, instead of losing seventy-five to eighty out of every hundred, they seldom lose a patient of fever. I have the figures and facts at hand, and have been a close observer of the medical profession and their doings in the Eighteenth Senate District, for the past twenty-five years. The new school lose not more than ten per cent of all fever patients, under all circumstances, including those who have been for a time under the poison treatment.

I have lost but two fever patients in 1867, and they had been under homœopathic and allopathic treatment for some weeks previous to my being called. Both had hemorrhage of the bowels, and one congestion of the brain also.

An honorable and worthy member of the Eclectic Medical Society of the Eighteenth Sénate District, treated one hundred and two cases of fever in 1866, and many of them of a very grave and malignant type, but did not lose a case, and even the worst cases were convalescing and so comfortable in two weeks that any old lady nurse could have safely cared for or been trusted with them.

Better, ah yes, a thousand times better, would it be for the people when sick to do nothing, have no doctor at all, than trust to old-school treatment in fevers and epidemics. This conclusion is founded on the practical experience and close observation of thirty years.

ARTICLE XVI.

Obituary Notice of H. M. Sweet, M. D

At the annual meeting of the Eclectic Medical Society of the State of New York, held at Saratoga Springs on the 12th of June, 1867, Dr. Freeman announced the death of one of its members, Dr. H. M. Sweet, of New York city. Drs. Jones, Stanton and Totman were appointed a committee to draft resolutions expressive of the feelings of the society in regard to his death.

Report of the Committee.

"*Fellows of the Eclectic Medical Society:*

"It is with pain and heartfelt sorrow that we hear the sad news of the death of H. M. Sweet, M. D., our friend and co-laborer in the great cause of medical reform, who, for nearly forty years, has devoted his whole life and energies for the alleviation of human suffering, the promotion and advancement of our chosen profession, and who died as he had lived, in the faithful discharge of his professional duties, falling insensible, in Drs. Law & Boyd's Botanic Drug Store, from a stroke of paralysis.

"We offer the following resolutions for the adoption of the Society:

"*Resolved*, That in the dispensation of an all-wise and inscrutable Providence, in removing from our midst and councils our late friend H. M. Sweet, the Eclectic practice of medicine sustains a loss of one of its tried and faithful pioneers, and most devoted advocates; the sick and distressed a faithful friend and servant; the friends of sanative medicine a true and zealous advocate; and the principles of veracity, integrity and goodness of heart a bright and shining light.

"*Resolved*, That to the bereaved family of the deceased, we extend our sincere sympathy, and the more deeply do we realize and feel the force of this sentiment from the fact that our lamented and worthy friend Dr. Sweet spent his whole life, strength and means, physical and pecuniary, in combating error and the use of poisons as medicine, so that he wore himself out, and died poor, a *martyr* to reform in the healing art.

"*Resolved*, That a copy of these resolutions be published in the American Eclectic Medical Review, the family of the deceased be furnished a copy, and that they also be placed on record with the Transactions of the Society.

"William Jones,
"L. Stanton,
"C. S. Totman, } *Committee.*"

ARTICLE XVII.

Annual Address, delivered before the Brooklyn Academy of Eclectic Medicine. By WM. W. HADLEY, M. D., Professor of Materia Medica and Therapeutics in the Eclectic Medical College of the City of New York.

THE DUTIES OF THE PHYSICIAN.

Ladies and Gentlemen, and Fellows of the Academy—Another year has rolled its annual round, and brought us again to the time when we have been accustomed to meet, depose those who have worn the honors of office, and borne the official mace for a twelvemonth, and appoint others, who as novices in authority, will, doubtless, endeavor to sustain the dignity of the positions for a like term succeeding. And we can but hope that the mantles of those who have so faithfully performed the onerous duties heretofore, have fallen upon others no less worthy of the stations.

It has become my duty, by appointment, to read before you an Annual Address, and while I conceive that there are many among you who might have done the occasion greater justice, and have prepared an address more useful and interesting; I can only say that I have done the best I could with the limited time at my command, and console myself with the reflection that it is not very tedious in length, even if it prove so in interest, and that at our next annual reunion some one may be chosen who will be more entertaining and instructive.

I would simply say further, that I have written this at intervals as I could find unoccupied time; have had little opportunity to review, and have scarcely read it; I have not given it that attention which such a production should require, but with all its imperfections, I claim your indulgence while I lay it before you.

In taking into account the duties of the physician, we have a large field to examine, and a great variety of thoughts present themselves to the mind as bearing directly or remotely upon the subject under consideration. Bodily health being one of the requisites which all mankind should, and we believe the most of them do, strive for, it becomes important to them what measures to adopt to continue it, if they already possess it; or, if impaired or lost, what they may do to restore it.

Unfortunately for the human race, few have sufficient knowledge of the laws which govern health and life, to prevent them from being frequently transgressors to an extent that subjects them to a penalty, which manifests itself in some one or more of the various forms of disease known in the nosology of the physician.

The human body was designed by its great Author to be a type of the symmetry of perfections; as one has spoken of it, it was no "journey work," but it is the complete Masterpiece of the Architect of the universe. Though in itself perfect, as it is given from the hand of its Creator, ignorance as to its powers and capacities, and an almost total lack of the knowledge necessary to prevent its working inharmoniously, of course leads to the legitimate results which must necessarily follow, viz: disease, and, if the departure be sufficiently great, death. The duty of the physician is, to try and arrest the progress of the disease, to stay the departing strength and turn back the tide of disorganization which is dissolving the tissues, and which, if not prevented, must terminate sooner or later the life of the suffering invalid.

That we are all born to die, is no more certain than that we are born with perfect bodies, provided we are born of healthy parents; and, if no accident should befal us, we should live the full number of years alloted to man—three score and ten. But the actual fact is far otherwise; more than one half of the human family pass from this to another stage of existence before the age of maturity; and how few—how very few, comparatively, do we meet who have arrived at the age to which all might attain did they know and obey the laws which govern their existence. But this condition of things has prevailed, doubtless, in all ages of the world, perhaps as much in this, our day, as in the centuries long past, for reasons to which I may allude before concluding this paper, and which have given rise in the minds of thoughtful people to the necessity that has existed, and still exists, for methods to obviate the results of disease, and relieve the body from its effects. Crude and unreliable were the earlier attempts to accomplish these purposes, and were I to enumerate these modes resorted to in these endeavors, it would, perhaps, amuse more than instruct those who are familiar with the more modern appliances used for the accomplishment of the same objects, at the present day. Doctors of the earlier ages were supposed to be necromancers, or sorcerers, and that, by the exhibition of some mysterious agent and mumbling over it some *diablerie* of unknown language, they could give it a

charm which should expel the demon of disease from the sufferer's body, and health would again return. These, with the arts of the Alchemist, were calculated to make an impression upon the invalid's mind, and if he believed the influence to be good, it would have a powerful effect in promoting his recovery. But the whole thing was too often but the result of craft and chicanery, gotten up for the sake of profit and preferment; and we are afraid that objections of a similar character might be found against some of their followers of the present day.

Impressions upon the mind of the patient, who looks to his physician for help, go a great way toward assisting in his restoration to health, and those impressions can only be made available for good by his having unlimited confidence in the skill of his medical adviser. To render himself worthy of this trust he should be eminently qualified by all the attainments that science can bring to his aid in the knowledge of his profession.

He cannot well be a competent practitioner of medicine if he be without science; he may to be sure, have a knowledge of some remedies that are suitable for the cure of some simple and uncomplicated cases; he may have a limited knowledge of the appearance and cause of some ordinary affections, and know how to administer simple agents for their relief, and may suppose himself in his own estimation and egotism considerable of a physician. But being inflated with one's own ideas, does not always answer in the room of science. There is no branch of knowledge relating to medicine or disease which the practical physician should be ignorant of. And he should also seek this information from every source from which it can be obtained. He not only should examine all works that treat upon the subject, and render himself familiar with their teachings, storing up in his mind all that the generations which have preceded him have collected; but from living persons, professors of the art, those whose lives have been spent in the pursuit of medical knowledge, and whose experience is an unwritten book in all that relates to the varied manifestations of disease and its remedies, he can acquire a fund of information that would take him long years of study and toil to acquire in his own behalf.

The physician's life, in addition to being a life of constant study, a life continually and untiringly devoted to thought and investigations in regard to the best means and methods of cure, must be also a life of endless care and toil. If he be a careful and earnest

man, and these conditions imply success in his profession, he may be said to have scarcely an hour he can call his own. His time is momently at the disposal of his patrons. No matter how severe the storm, how bleak the piercing winds of Heaven, the chilly blast must be encountered and the howling tempests endured to carry the relieving draughts and consoling counsels to the weary sufferer's couch of pain. What tired artisan, fatigued by the incessant toils of the day; what person engaged in the pursuit of honors or wealth, in any other of the business channels of life, will so uncomplainingly leave his bed of repose to which he has, perchance, but scarcely consigned his wearied frame, exhausted as he is in the laborious duties of his toilsome profession; what other person I say, without thought of wearinesss or need of slumber, will drag his weary limbs out into the starless and threatening night, and hasten to the abode of the suffering or the dying, to assuage the pains of the distressed, or to smooth the pathway of the departing, in the lessening hours of existence, to the last home appointed for all the living? The requirements imposed upon him in consequence of the position he holds in society, and the relation in which he stands to his fellow beings, growing out of his profession, demand from him these nights of sleepless vigilance, notwithstanding that his over-wrought body, however much it might be fatigued with the weary labors of the day, would so gladly yield to slumbers, and woo "tired nature's sweet restorer, balmy sleep." But his mission is there, and he is not the man to shrink from the fulfillment of the duties which devolve upon him in the practice of the profession to which he has devoted his energies and his life.

The physician's duty, also, is to be discreet; a man of probity and honor. Introduced as he is, familiarly into the families of his patrons, his mission brings him, like one of the domestic circle almost into intercourse with them, and he learns more or less of their histories in all their relations of life.

Many things would necessarily come to his notice in his capacity of counsellor and friend, as well as medical adviser, that he should keep inviolate in his breast under the strongest ties and obligations that could bind the human conscience. Disclosures, it may be, are made to him and confided to his discretion, which are told to no other living person; not even the father confessor himself, perhaps, has placed in his keeping, or has revealed to him so much that concerns the devotee, as does the physician; and he is

bound, therefore, by the most sacred of obligations—that of his honor as a man—to preserve inviolate the confidences that have been reposed in him professionally. This condition of things is recognized by all, even the law does not compel the violation of the trust, unless a crime be revealed, and he must be recreant, indeed, who would so far forget his position and the confiding people who had honored him as the repository of their secluded thoughts, as to abuse the faith which had placed them in his charge.

No excuse, be it ever so meek or so regretful, could ever satisfy the mind of the injured, or restore the culprit to favor; no apology, however full and explicit, could be an equivalent for so base a betrayal. He would place himself in a condition to be looked upon with scorn and contempt; friends would forsake him; he would sink into merited obscurity, and his name and habitation should be lost in the dark waters of oblivion. This might seem wrong to some, might appear as if it was visiting a careless indiscretion, to call it by no harsher name, with a penalty of too much severity. But if we take it into a closer consideration, perhaps we may more clearly see the justice of it. The physician is called upon, as such, to employ his skill in restoring the body to health; necessarily he must ascertain why it requires his aid, and what has caused the disease to which he is expected to administer a remedy. If we violated no laws of health, if we were careful to infringe none of the physiological rules which preserve us in existence, the physician's aid would rarely be required; like Othello, "his occupation would be gone." But moral as well as physical laws are often broken, and in ascertaining the causes of disease, so as to be able intelligently to prescribe a remedy, if he has laid bare to him any of the foibles or indiscretions of his patient, should he not conceal, as within the recesses of the tomb, whatever has been revealed to him to assist him in the pursuit of his investigations? He sees life in all its phases; he meets patients under varied and peculiar circumstances; with those surrounded with happiness and every enjoyment to make life pleasant and glad; as well as those upon whom the dark and sombre shadows have fallen, and the genial sunshine of life has been shut out from their hearts, and their sorrowful lives have been warped from nearly all semblance to humanity. To these, to the one as to the other, his duty is to minister to their ailments; and to the one as to the other he must keep his faith and cover their transgressions, if they come to his

notice, and forgive them while he heals their infirmities, as he hopes himself to be forgiven.

The customs of society and the opinions of the world, as well as the requirements of the fraternity of medicine, enjoin this upon the practitioner; and we are not without examples in our own day where a malfeasance of this character was visited with both public and private disapprobation, although in the instance referred to the betrayed had forfeited nearly all claims to forbearance in the eyes of every one. But the principle is so correct, and so universally acted upon, that the offender suffered the loss of the confidence of his patrons, for they reasoned that a breach of faith under one set of circumstances might possibly lead him to commit a like default under others.

The physician's life is one of great care and anxiety, he meets the issues of life under peculiar and varying aspects, his duties lead him among all classes in community, and the responsibilities he assumes are often onerous in the extreme; the momentous issues in his hands are frequently those of life and death, and, in order that he may be found worthy to hold that position among his fellow men, his competency should be unquestioned, and his probity and professional reputation unblemished.

In addition to all this, the calling of the physician is one of peril—his life is more or less constantly endangered. His exposure to dangers in various modes is more manifold and obscure than that of any others of his fellows, and consequently he is, or must be, a man of courage and bravery. I do not wish to imply that there are not others who meet dangers upon sea and upon shore, but the motives which impel them are far different from those which should actuate the breast of the medical man. Those who go down to the sea in ships, go in pursuit of wealth to increase their substance, the love of which is said to be "the root of all evil," and they face death and tempt the raging main in its pursuit, and often, very often sacrifice their lives in the undertaking; but it is for self, selfish impulses govern them, and the penalty is but the legitimate fruit of their temerity.

The hero of a hundred battles places his life in jeopardy in pursuit of glory. His love of country and her institutions impel him often to deeds of daring, and often the plaudits of his countrymen sound in his ears the loud acclaim of praise for his bravery and success upon the field of carnage, which stimulates him to exalted courage, and proves a balm to his proud and ambitious spirit. He

has many things to prompt him to noble deeds of valor. The stirring peals of the brazen trumpet of war; the inspiriting strains of martial music; the serried columns marching forward in unbroken array; the prancing steeds, the gay and brilliant banners of his country borne aloft, and all the "pomp and circumstance of glorious war," conspire to fill his breast with those emotions that lead him into the thickest of the struggle, unheeding the glittering steel or leaden messengers which in a moment may prostrate him in the dust. But how different is it with the earnest and benevolent disciple of the healing art? Devoting himself to the preservation of the lives of mortal man, he goes among the victims of pestilence gathered in the hospitals, or makes his way with silent tread to the darkened room of sickness in the proud mansion of the wealthy, or the lonely desolate cottage of the forsaken poor; for disease comes alike to the little and the great; and there, when silence broods around, and there is no clash of arms or clarion note to animate his spirits, bent upon his noble purposes, he exposes his health and his life to the "pestilence which walketh in darkness, and the destruction that wasteth at noonday. He must not shrink from the grim monster, in whatever form he may appear; whether in the low, muttering typhus, which unnerves and prostrates its victim, drying up his blood and wasting his strength; the cholera, with its dissolution of the vital fluid, and destruction of the energies of life; variola, with its pustular, bloated eruption, and poisonous, death-dealing effluvia; the black plague, or the thousand other ills that flesh is heir to; but he must gird up the loins of his spirit, and, in the still dark hours of the night as well as in the noonday sun, must meet and contend with the king of terrors with such weapons as science and skill may give him, for the lives of those who may be entrusted to his care, while exposing his own life to the effects of the contagion. What a difference there is between the surroundings of the physicians and those of every other profession in life? He risks his life daily almost, in his labors; and much of his time is given gratuitously to those who are not able to remunerate him for his services, "for the poor ye have always with you." But bravely he faces the dangers and uses his best endeavors to overcome the maladies that effect others. How important, also, that he should be prepared with every remedy that science has discovered for the promotion of his objects; how necessary that he should be armed with the proper weapons for the warfare in which he is engaged? Disease is insidious and

crafty, and meets him in every guise and on every hand. The battle frequently wages sore, the contest is often protracted and dubious, and the result, like a wavering balance, is uncertain which way it may turn.

Among the many agents presented for his use, he should be prepared with a suitable knowledge of them all, and thus be able to make a judicious selection among them, according to their qualities of efficiency and safety, under the trying circumstances in which he is placed. He should leave nothing to chance, but invariably select the best. He should not resort to those which in many instances might answer a favorable purpose, yet in others fail him, and perhaps when he most depended on them and when most essential in the treatment of his patient; but he should choose those to which these objections could not apply, which were tried and true, which are, if possible, reliable under every circumstance, like pure gold seven times tried in the fire.

Would any suppose there might be objections to a physician deciding to select for his use such remedies as his judgment, his education, his experience and his conscience taught him to be the best—those which would act with the most certainty and safety, which would be the most effectual in removing diseases, while at the same time they would do the least injury to the constitution of the patient? It may appear to some that this is a strange proposition, and this an unnecessary question to ask in this enlightened nineteenth century. I will affirm that it is a strange proposition, but also that it is not an unnecessary question. There are those who claim that physicians must employ certain means and measures—particular agents which they name and extol for their usefulness—or else be driven from the fraternity of the profession, and counted only worthy to be known by the appellation of *irregulars* and *quacks*. Those whom they would thus term may be skilled in all that relates to medical or general science, may be accomplished in literature, history and all the acquirements pertaining to the scholar; but yet if they presume to treat diseases without employing certain compounds, which they consider injurious and destructive to health and life, the attempt is made to destroy their professional reputation, and even their standing in society and as citizens of the State.

I do not know but I should more fully explain why this condition of things exists, why we, as Eclectic physicians, should be so

opposed to the use of so-called remedies which have been employed so long, some of them from ages of remote antiquity, so long that "the memory of man runneth not to the contrary;" long enough it would seem, if they were valuable, to establish their reputation beyond the shadow of a doubt. But how many have been slain by calomel and other noxious, dangerous drugs? "More have perished from their use," says an eminent medical author,* "than have been destroyed by famine, pestilence and the sword." Who among you would dare to take one dose of it even? Who among your acquaintance is anxious to fall a sacrifice to its employment? Rarely at the present day will you find a person who will take it, if he knows it. And why this mistrust of its value, this objection to its use? Because it has probably done more damage to the human family than any other article ever employed as a medicine, and I might say, perhaps, more than all other articles put together. I do not speak at random when I say this; there is ample proof of all I assert. The most celebrated physicians of this or any other age have deprecated its employment, and while there are so many others remedies that are equally useful, and many of them far more so, there is absolutely no excuse for resorting to anything so unsafe and dangerous. The time will come when it will be spoken of only as one of those obsolete remedies that were formerly in use, but have been superseded by those that are more effectual, and to which the objection that they are unsafe and dangerous cannot apply.

I might refer to other articles here that have been, and are still in daily use many of them, but which, upon account of their unfortunate effects on the human system, and their potent tendency to destroy life, we oppose their use as medicines. They are dangerous at best, and if their employment can be substituted by agents that are efficient and safe, there is absolutely no excuse for their administration. I might instance here the prevailing practice of twenty-five or thirty years ago, of general blood-letting. Invariably, almost, if a physician was called to see an invalid, it mattered little what was the nature or character of the disease, the first thing to be done was to open a vein in the arm and let a portion of the purple current of life run to waste, not seeming to comprehend that if there was any of the blood that was bad, it would be likely to remain in the body, while the fluid or healthy blood, if any of it was healthy, would flow out and be thrown

* Dr. Mason Good.

away. Is it to be supposed that we have any too much blood? that we were created in a way in which it would be unsafe for us to live, so that we should be obliged to gash a vein in the arm and let out a part of our lives? It has come to be supposed generally at the present day that this process is entirely unnecessary, and this idea has been so thoroughly inculcated by those who have taken a scientific view of the matter, that very rarely will any class of physicians now attempt to put it into execution. Eclectics have done much to create this state of public opinion; they have ever been opposed to its use, and have exposed its fallacy so thoroughly, and its uselessness and injury so completely, that no one will now consent to its use, and few dare propose a resort to it. The practice of medicine is being reduced more nearly to a science; we believe its principles and practice must be more generally submitted to severe and rigid scientific tests, and it will be found that, when so submitted, much that has been supposed to be the science of medicine will be discovered to have been but the "baseless fabric of a vision," which we might liken to that which was seen by Nebuchadnezzar the king, as related by the Prophet Daniel, and which has been in the eyes of the people, as was that in the eyes of the king, "a great image, whose brightness was excellent, and the form thereof was terrible." But the light of revealed science, which is overturning these false doctrines in relation to dangerous medicines and blood-letting, is like "the stone which was cut out without hands, which smote the image upon his feet that were of iron and clay, and brake them to pieces." "Then was the iron, the clay, the brass, the silver and the gold broken to pieces together, and became like the chaff of the summer threshing floors; and the wind carried them away that no place was found for them; and the stone that smote the image become a great mountain and filled the whole earth." So will true discoveries sweep away the dust of ignorance, and, as intelligence extends, pervade the minds of all the inhabitants of earth.

Opposition will arise to truth; it has already arisen, but it is truth nevertheless and will prevail, while a simple opinion or theory may be true or may be a fallacy. Truth has existed from the foundations of the earth, and science does but succeed in developing it. It is immutable as the firmament, and never changes; we only ascertain its existence by our efforts, for it is the same from generation to generation. If a theory or a practice be founded on a falsehood, it will be like building a house upon the

sand, and when the storms of investigation come upon it, it will be overturned and destroyed.

Eclecticism seeks but to learn the truth in regard to medicines; the name, which is derived from the Greek, signifies to select; and Eclectics select from the domain of medicines only those remedies, which, when employed in the removal of disease, are at the same time safe to the constitution of the patient. They seek to act on the disease without endangering or impairing the vital forces of life, and carefully conserve the functions of the body while gently assisting it to resume its normal condition. That practitioners of this school of medicine have been more successful than those who are termed old school, we have but to turn to those records that have been kept of their practice in the treatment of almost every variety of disease, and particularly in that of cholera—a scourge that we may now soon expect to visit our shores. In Cincinnati, where the Eclectics in 1859 had a cholera hospital, under the charge of the board of health of that city, and where they also treated patients miscellaneously at their homes, the percentage of death in their treatment was, in the hospital, including all the cases sent there, about twenty-six in a hundred cases, while that of the old school was some sixty; while in private practice, in the treatment of over fifteen hundred patients by Eclectic physicians, the deaths were less than five per cent. These hospital records were kept by the board of health, and published in the daily papers of Cincinnati at the time, and, of course, cannot be gainsayed; they are testimony as important and as thoroughly substantiated as facts can make them. Not only in that but in other diseases, their success is abundant as well as gratifying, which is, no doubt, in consequence of their adherence to those principles of treatment I have heretofore enumerated.

We have only to continue in our straightforward, undeviating course of practice, and, as far as possible, enlighten the public mind in regard to the peculiarities and principles which govern us in the treatment of disease, and we shall gain the attention of the enlightened and the intelligent. The more our system is known, the more will it be appreciated, and, as it is founded on the principle which believes in trying all things, and holding fast to that which is good, it must sooner or later be the prevailing system of medicine throughout the world; like the stone that smote the image, which became a great mountain and filled the whole earth.

We meet opposition, we must expect to. No innovation upon long established customs was ever made without it. But opposition should only stimulate us to greater exertions. Discoverers of truths in former ages have met the same; some have lost their property, their standing in community, and their lives even, by being in advance of the age in which they lived.

Copernicus and Galileo were imprisoned and buffeted for promulgating some of the greatest truths which ever enlightened mankind. Harvey, for elucidating the principles upon which depend the circulation of the blood, was traduced, injured in his practice, and suffered from calumnies wickedly reported about him. Vaccination, and inoculation to prevent the ravages of the small-pox, and the use of chloroform to lessen pain were opposed, because it was said we should not interfere with what Jehovah required us to bear. Fulton was laughed at and abused for trying to supersede wind in propelling vessels upon the sea. These and many other examples might be cited to show the difficulty there is in inducing people to believe there is any better way of doing anything than the one they have always been accustomed to. But who thinks now of returning to sails upon the waters when traveling, or enduring pain, or being pitted with small-pox when it can be prevented? So will it be with the practice of medicine. Those systems which are most successful and the least dangerous will be adopted and endorsed, and the physician who practises them will be the most sought for and employed.

It is the duty of the physician to inform himself of every kind of treatment which claims to be a system of medicine, and not let prejudice or any other feeling prevent him from the investigation. It is only by this course that he can become competent and proficient in his avocation. It is only thus that he can fully avail himself of the labors and experience of others, and be prepared to benefit his fellows by his own labors.

It is said by some that Eclectics are not as well educated in medicine as those of other branches of the profession, and therefore are not entitled to the same consideration, and should not be regarded as being members of that time-honored fraternity. This may be true perhaps in individual cases, there may be members of any association who are no honor to it; there was even a Judas among the disciples; but there is no reason why Eclectics cannot be as well versed in science as any. They have the same authorities in medical literature that are possessed by any, the same ave-

nues of instruction are open to them in all the branches of the art, and it is their own individual neglect if they do not avail themselves of their benefits. But the supposition is not true. In addition to all that is taught in the general schools of medicine, they have a large and valuable array of medicines which they have sought out and brought into use themselves, which are now rapidly superseding many of the injurious articles which have been employed, and been supposed to be the best that could be obtained, but are now, on account of their danger and uncertainty, speedily falling into disuse.

These remedies of Eclectics, although their discoverers are placed under the ban of proscription, are yet extensively employed by all classes of practitioners, who praise their virtues, while those who introduced them to professional notice are carefully kept in the background. It is by these means that some attempt to absorb all the advantages that have accrued to the science and practice of medicine themselves, and leave those who have been instrumental in accomplishing it in the vale of obscurity, fit only to be the objects of contempt. But this is not an age in which ignorance prevails to such an extent as it did centuries ago; the people, where they have the opportunity, see the difference between the two modes of practice, and also, when it is explained to them, they are almost universally in favor of the enlightened progress that has been made in curing disease, and there is little or no doubt that wherever the system is fully and thoroughly understood, it will be the prevailing practice to be relied upon; and sooner or later its beneficent influence will extend to and be felt wherever civilized man shall exist upon the earth.

In proof of this idea, and that this opinion prevails to a certain extent, and that it will doubtless more and more prevail hereafter, I may state, what many of you have experienced probably, that many of those who have been termed old school physicians claim to occupy the same ground that we do, and they say they always occupied it. Now this cannot well be so from the fact that we have always opposed many of their ways and modes of practice. For instance, we have always opposed the use of calomel. "Well," an old school physician says, "but look here! there cannot be much of any difference in our practice, we use many of your remedies, most of them perhaps, we are much about the same as you, the science of medicine is all alike, it is one thing for us all, and we are quite as much Eclectic as you are."

But we tell him no—he uses calomel, which we do not believe in at all, and bleeds people sometimes, or used to, if he does not now. "Oh, no," he responds, "I do not use calomel very often; people are becoming very much afraid of it, and if I do give it I often am obliged to deceive them and not let them know they are taking it, for most of them utterly refuse if they are told what it is, and I find many times I can use other and safer remedies where I once thought I could only use that, so I don't use but very little now; and as to blood-letting, why I scarcely ever bleed, not on an average two patients in a year; so now you see I am almost as much of an Eclectic as you are." We can but congratulate him for the change so far, and hope it may continue, and we believe it will till he becomes not only almost, but quite as good an Eclectic as any that can be found, which position we believe all will eventually occupy who practice the art of medicine. But let us look at the premises a little. He says he is becoming an Eclectic. Now, which has changed, he or ourselves? We were always opposed to the use of calomel, he is becoming so. We have always objected to the use of bleeding. He now almost entirely discards it, resorts to it very rarely indeed. Who have changed their views in relation to the matters of difference? Is he coming over to our views, or are we going to embrace his? The answer is apparent, it need not be expressed.

For the sake of suffering humanity and in behalf of mankind, we are glad that it is so, we are anxious to have all embrace the truth, and should rejoice if they were willing also to recognize and acknowledge the agencies by which these truths were introduced to the profession.

It might be pertinent here to refer to the influences that some of these agencies have had upon the health of the present and earlier generations. It is probably within the knowledge of many of you that people have suffered with terrible ulcers, resulting from the use of calomel. Can we enumerate the number that have been sent to premature graves by its use, or those who are now dragging out a miserable existence, in consequence of its presence in their muscles and tissues, giving rise to constant annoyance and pain? How many have had it administered for a disordered liver, being told that nothing else could produce an action in that organ, and when the violent excitement caused by it had passed away, the exhausted viscus was left in a more torpid condition than before? When action was again required, a larger dose than

before would be necessary, till eventually the over-wrought gland would cease to respond to the influence of the mineral, and a confirmed liver disease would be the unfortunate *succedaneum*. Many broken constitutions and languid existences may be traced to its use, and need we longer wonder at the enfeebled condition of the people of the present age, when we take into consideration the disastrous effects of that one agent alone? The toothless gums throughout the land, give a history of its extensive ravages that is only necessary to refer to, and when we observe a perfect set of teeth, our minds instinctively recur to the dentist's sign in the window, a profession by the way, whose numbers have necessarily been greatly augmented by the injudicious use of the article in question. But there is no reasonable opportunity for a doubt that its days, as a medicine, are numbered; and, although very ponderous, it has been "weighed in the balance and found wanting" in those useful and valuable qualities for which it has been formerly so highly extolled. No more can it be regarded as that useful and powerful ally which it was once thought to be; the day of its usefulness, if it ever had one, has passed forever away; the march of improvement and the age of revealed science, have so damaged its reputation, that intelligent minds have lost any respect they may ever have felt for it; now it may resume its place in the arts, or be employed for mechanical purposes. Its place never should have been in the human stomach, and our consciences and duties to our patient require us, as far as considering it a medicine is concerned, to leave it in merited obscurity.

Fellows of the Academy, you have therefore but to adhere to those principles which have actuated you hitherto; be firm in your convictions of truth and right; and, although you may frequently have to fight hard battles to sustain your views, rest assured that victory will inevitably crown your efforts, and bring you off conquerors in the strife.

ARTICLE XVIII.

Brooklyn Academy of Eclectic Medicine. Eighth Annual Report of the Secretary, H. E. Firth, M. D.

The Brooklyn Academy of Eclectic Medicine is now assembled to celebrate its eighth anniversary.

As secretary of the society, I propose to state some of the objects for which we have become associated, as also some of the circumstances connected with our organization.

By referring to the preamble and resolutions preceding the constitution under which we are organized I find the following:

Whereas, We, the assembled physicians and surgeons of the city of Brooklyn, are desirous of availing ourselves of the advantages to be derived from a more intimate fellowship and fraternity; be it therefore

Resolved, That we proceed to organize a society to be called the Brooklyn Academy of Eclectic Medicine, having for its object the cultivation and improvement of the science, as well as in the arts of medicine, and also to promote a spirit of professional liberality among ourselves, as a constituted body, under the Eclectic principles of practice, which is the philosophy of selecting remedial agents that possess the quality of safety, as well as efficiency.

Resolved, That for the furtherance of these declared objects this meeting do now proceed to organize, &c.

After a continued and harmonious action of this society for a term of six years, on the 15th day of March, 1866, the Brooklyn Academy of Medicine became auxiliary to the Eclectic Medical Society of the State of New York.

The society has continued to meet regularly since its organization, and has steadily increased in strength and numbers.

During the last year we have held eleven meetings; our regular meeting being held the first Wednesday of each month (the month of August excepted).

The essays presented before the society from time to time, have exhibited evidences of the close application of their authors, as also much originality of thought and experience. The discussions have been interesting and instructive, and all criticisms occuring

during the discussions have been made in a spirit of kindness. The society, at all of its meetings, has received friendly visits from a number of New York physicians, who have been requested to add their experience upon the various subjects under discussion.

There has been a number of accessions to the society during the last year.

We have now three propositions for membership awaiting the action of the board of censors.

Requisites for Membership.

Article 12th of the constitution says: Any physician who is a graduate of any respectable medical college, and who sustains a reputable professional position, may become a member of this society.

Article 13th.—It shall be the duty of each member of this academy to treat with professional courtesy all educated and respectable physicians of whatever school of practice, unless they be guilty of violation of the principles of gentlemanly conduct.

The following are the officers of the society:

President—W. W. Hadley, M. D.

Vice-President—J. Y. Tuthill, M. D.

Secretary—H. E. Firth, M. D.

Treasurer—B. J. Stow, M. D.

Censors—W. B. Warner, M. D., J. Horton, M. D., J. E. Danelson, M. D.

Previous to the formation of the Brooklyn Academy of Medicine, there had been in existence for about six years an association of physicians under the appellation of the "Eclectic Medical Society of the county of Kings." At the time this last named society was organized, the Eclectic profession were (at least in a numerical point of view), but feebly represented in Brooklyn. The Kings County Medical Society (old school) was at that time the only legally incorporated medical society in the city, and their members availed themselves of every opportunity to make us feel the advantage they possessed over us.

The insults we received from the more gross of that venerable body were both frequent and severe. Not only as individuals did they oppose us, but at least upon one occasion they called a meeting extraordinary of their society, and as the result of their united council, there emanated an edict requiring all outsiders to appear before their august president and exhibit diplomas and other testi-

monials, in order that they might judge of our merits, and learn as to whether we practised medicine in accordance with their orthodox conceptions of right.

Our physicians did not appear before this tribunal, but they called a meeting extraordinary of our society, which met at the Brooklyn Institute, Sept. 17, 1857, to disclaim against the dogmatical censorship of the "old school" society. The meeting was addressed by various physicians, prominent among whom was Prof. Levi Reuben.

The following was among the several resolutions passed:

"*Resolved*, That while we believe in the largest liberty of thought and investigation, we can but regard the late movement of the allopathic medical society as an attempt to exercise a dogmatical censorship, wholly unwarranted by law, and unworthy of the age."

Our transactions were reported and published in the daily papers, and our sentiments went before the public in such a shape that this "hierarchal" power of legalized medicine hesitated to take further steps in the matter.

At the time above referred to, the Eclectic physicians had not only an established society in this city, but also belonged to a joint society composed of Eclectic physicians of New York and Brooklyn, which met at the Medical Hall, No. 68 East Broadway, N. Y., which was known as the "New York and Brooklyn Medical and Pathological Society." They had also a State society and a chartered medical college in New York.

The professional gentlemen of the Kings County Medical Society would not, however, recognize us as physicians at all. When circumstances would bring us in contact with these men, the meaner portion would supplant us by strategy if they could, and take every opportunity to vilify our professional standing, and bring us into discredit. The more honorable portion of that fraternity would affirm that they had no personal feelings against us, but would refuse to council with us, upon the ground that they belonged to an association whose rules denied them the privilege to consult with any physician who did not belong to their particular school of practice.

In those cases of emergency, and where council was not so much desired as assistance, as for instance, in extreme surgical cases, instrumental deliveries, etc., as also in those cases in which by the special request of the patient or their friends, a certain physician was desired in council, these gentlemen have refused,

supposing that in so doing we would be discharged from the case, and that by their continued opposition they might weaken the influence of Eclectic physicians, and bring their practitioners into contempt.

The Brooklyn Academy of Eclectic Medicine, as also the principles of Eclecticism, have steadily gained friends, both with the public and the profession; the opposition of the "old school" against us (if not from principle, as a matter of policy), is becoming less every year. We expect to fight this feeling of bigotry and exclusiveness of the allopaths until they recognize our claims, or base their objections upon other and more definite grounds than their sectarian prejudices.

Eclecticism in medicine originated as the lawful child of circumstances. It was conceived, germinated, and developed, as the fruitful product of science, and nourished amid those influences and surroundings that have for their support fixed laws and principles.

No stronger proof is wanting as to the fallacy of the profession of medicine at the time of the advent of Eclecticism, than the incongruity between the knowledge then possessed of the collateral science of medicine, and the *gross errors* now known to have been entertained with reference to the law that should govern the administration of remedial agents.

The practice of the profession at the time of the crusade of Eclecticism against this ridiculous system, was to deny fever patients a drop of cold water, to quench their thirst; bleeding was the order of the day, and calomel the lion of the drug store. The system of the suffering patient, which was already weakened, was further, and intentionally, reduced, in order to subdue disease.

The stomach was made a receptacle for large doses of nauseous, and frequently very poisonous medicine. If the sufferer recovered, it was after a protracted sickness, and with his nervous energies prostrated, his system frequently saturated with mercury, and his future usefulness limited save for the purpose of a walking barometer, or the future pecuniary interest of the doctor.

The fallacy of this mode of practice being detected by a few original minds, they immediately, and in a true philanthropic spirit, set themselves to work to remedy the evil.

The theory was natural that the mode of practice then pursued by the allopathic profession was not in accordance to human reason or the teachings of science. They witnessed, by the mass of

the profession, the free use of depressing and corrosive mineral poisons, to the neglect of the more innocent remedies of the materia medica. They had the boldness to discard the authority of schools, where the doctrines taught were at variance with their better judgment.

They expected opposition, but believing in the justness of their cause, they had the manhood to defend their principles. They did not simply stand on the defence, or take a negative position, but they determined to fight this evil; they claimed that it was not only unscientific and wrong to employ many of these so-called medicines, but they introduced in their place positive remedial agents, chiefly selected from the vegetable kingdom; remedies that were safe and sanative, and that would assist rather than counteract the efforts of nature.

Their principle was to select, from all systems and schools of medicine, the best means and modes for the treatment of disease, to discard bloodletting, calomel, antimony, lead and kindred poisons, as unscientific and murderous, and opposed to the later developments of physiology; to apply themselves more closely to the study of organic chemistry, and to the discovery of the therapeutic properties of vegetable remedies; in fine to become liberated from the dictation of sects, and free to investigate the claims of all systems of practice.

The spirit of Eclecticism has so far prevailed, that the ground heretofore occupied by the "old school" has become untenable; they have not only yielded up their former position and principles of medication, but also the very remedies upon which they previously so much relied; until allopathy of to-day has no prototype in allopathy of thirty years ago. The day is fast hastening, when the practice of medicine will fully harmonize with its collateral sciences, and when, under the guidance of science, all physicians will become in the true sense of the term Eclectic.

ARTICLE XIX.

Pathology and Treatment of Croup. A Paper read before the Brooklyn Academy of Medicine, November 6, 1867. By H. E. FIRTH, M. D.

Mr. President and Gentlemen of the Academy—As I have been appointed to read a paper before this academy of medicine, I have endeavored to select a subject which I trust will interest you all, and which, I hope, will become the chief point of discussion this evening. I desire this, not so much because I have presented the paper, but because I consider the subject one of sufficient importance to occupy your attention; and because, also, that the season is now passing when each one of us may be called to contend with a disease, one form of which is so formidable, that a majority of the profession have considered it as almost incurable.

The subject that I propose to present for your consideration is, The Pathology and Treatment of Cynanche Laryngitis, or Croup.

CLASSIFICATION OF THE DISEASE.

No exact classification has been generally received or adopted by authors.

Prof. Watson says that the essence of the disease is a violent inflammation of the trachea, and that from thence the inflammation sometimes ascends into the larynx, and at other times descends into the bronchia and their ramifications. He attempts to show a difference betwen cynanche trachealis and cynanche laryngitis.

Prof. Wood claims that croup is not essentially an inflammation of the trachea, as we may have inflammation frequently in young children without exudation of membrane. He recognizes two forms of the disease—the catarrhal and the pseudo membraneous.

Dr. Ware, in a paper from which he has received considerable credit from the allopathic profession, makes four divisions of the disease: 1st, the membraneous; 2d, the inflammatory; 3d, the catarrhal; 4th, the spasmodic.

Prof. Flint classifies the disease under the head of laryngitis. He distinguishes the varieties as: 1st, acute simple laryngitis; 2d, sub-acute; 3d, chronic; 4th, exudative laryngitis. Laryngitis with exudation, he recognizes as the only true form of croup, and

he evidently confounds inflammatory croup with acute, or subacute laryngitis.

The late Prof. I. G. Jones gives, in my opinion, a better classification of the disease than that of any of the authors whom I have read. He makes his classification upon a pathological basis, and arranges and discusses them under the heads of the spasmodic, the inflammatory and the membraneous.

Churchill, West and others recognize properly but one form of croup; and most authors make but little distinction between the inflammatory or catarrhal, and the membraneous. The classification of the varieties of croup by Dr. Meigs, bears the nearest resemblance to that of Dr. Jones of any author.

With thus briefly noticing the nomenclature, I come more particularly to the pathology of the disease. It will be perceived that I recognize three distinct conditions, or pathological distinctions, the classification of which are in harmony with the previously arranged views of the late Prof. Jones.

1st. The spasmodic croup. This form of croup may depend upon a variety of causes. It is not so much an idiopathic as a symptomatic disease, and may have no further bearing or pathological connection with true croup than that implied by the name, which appellation is derived from the peculiar, stridulous, barking and croupy nature of the cough; together with the fact that it occurs about the age, or within the time, usual to the severer forms. Should death result from the severity of the spasm of the glottis, which seldom happens save when associated with grave diseases, dissection reveals no alteration of structure or exudative depositions in the trachea or larnyx.

The cause of this form of croup may be from without, as from the inhalation of noxious and irritating gases, which affect the peripheral extremities of the nerves of the larnyx; or from within, and from some disordered condition of the blood; or from some local irritating cause which may be reflected to the spine and along the line of the spinal accessary nerve, which unites with the laryngeal branches of the pneumo-gastric, and distributes to the muscles of the larnyx and trachea.

This variety of croup is the easiest subdued of any, and will mostly yield to the simplest form of medication. Simple antispasmodics, combined with expectorants, and subsequent treatment to remove constipation, or febrile symptoms, will be all that is required. Should the spasm of the glottis be persistent, an

emetic will readily remove the urgency of the symptoms, by restoring nervous equilibrium, and allaying muscular excitement.

The second variety of the disease to which I would call your attention is the inflammatory. This form I find mostly confounded by authors either with acute or sub-acute laryngitis, as it is manifested throughout all ages; or, with the membraneous form of the disease. That it has no true pathological connection to the membranous I am confident, and critical examination will determine the difference. In true membraneous croup you will seldom find the fauces inflamed; if it be a bad case you may find the upper margin of the glottis coated with false membrane, which may extend over the epiglottis and reach somewhat to the adjacent tissue; the base of the exudation may present some features of inflammation, or rather appear irritated and vascular; but the appearance is circumscribed to that portion of the integuments immediately surrounding the exudation, or false membrane. The seat of the disease is, however, mostly confined to the larynx and trachea, and is more apt to extend downward than upward, frequently reaching the bronchia and invading the upper portion of the bronchial tubes. According to my experienee, the opposite to this tendency to descend is observable in diphtheria; this latter disease, as a rule, is disposed to ascend rather than descend. It is an exception to the rule that diphtheria invades the laryngeal passage in the commencement of the disease; but in the majority of instances the exudation appears about the tonsils, and extends from thence to the uvula and soft palate; and in its spread it invades the pharynx and posterior nares, in preference to descending into the larnyx and trachea.

In the inflammatory croup, the disease usually commences in the larnyx and extends from thence upwards and sometimes downwards, until the inflammation may reach the bronchial tubes. The posterior portion of pharynx frequently looks red and inflamed, the margin of the inflamed tissue is not well defined, as in the membraneous form, but graduates off until the distinction is lost between the inflamed and healthy tissues. The constitutional symptoms also materially differ. In the membraneous, the disease is insidious, and approaches like an adroit thief, stealthily; frequently before the parents are apprised of the danger, the patient is beyond the reach of remedies. In the inflammatory croup, the disturbed state of the system is marked from the commencement; we have in fact all the symptoms common to other local inflamma-

tions of the air passages, the breathing is hurried, the respiration dry, the skin hot, the pulse accelerated, the countenance flushed, and the eyes suffused. Dissection reveals an engorged and vascular condition of the mucous membrane, and an infiltration into the cellular structure of the sub-mucous membrane, of a glutinous, and a puriform secretion.

Death in this form of croup is not caused from spasm of the glottis, but from infiltration into the cellular tissue, causing obstruction of the larynx. The inflammation is not confined alone to the larynx and trachea, as has been before stated, but frequently extends upward through the glottis, and can be seen during life in the pharynx, the mucous membrane of which appears not studded with gray, or white exudations, as in diphtheria and croup, but elevated, red and engorged. If exudations appear in this form of croup, they will present a very different appearance from the false membrane of croup; they will be soft and plastic, and not organized like the last alluded to. When the inflammation is reduced the exudation readily disappears.

The third variety of croup is the true membraneous. This is in my opinion an outgrowth of a constitutional cause. That atmospheric influences and changes of season or temperature is not the primary, but simply an exciting cause, is evidenced from the fact that the disease is peculiar to a certain age of childhood; whereas if these changes were sufficient of themselves, all ages would be subject to the disease.

Membraneous croup is not, properly speaking, an inflammatory disease, as no unusual disturbance of the system is manifested, as a rule, until the exudation affects the laryngeal passage. The pulse seldom rises much above the normal standard until the local condition of the larnyx and trachea prevents the free admission of air into the lungs. It is quite common to see the patient playing around, undisturbed, only as he is interrupted by the hoarse, barking cough, and the periodic spasm of the laryngeal muscles. As the exudation increases, the orifices become more closed, and the patient is noticed involuntarily to call into exercise more vigorously the respiratory muscles, as also the diaphragm, that a larger supply of air may be admitted to supply the blood with oxygen.

The absence of inflammation, as manifested in the pulse, is one of the diagnostic symptoms of membraneous croup, and distin-

guishes it from the inflammatory type of the disease, and from diphtheria. In diphtheria, as also in inflammatory croup, the pulse is almost always accelerated. In diphtheria, unless the disease is very light, the pulse is seldom less than 120, even before the exudation has taken place to any considerable extent; indeed, if the exudation is copious, and you have not this characteristic pulse, the disease will readily yield to treatment.

The exudation, or false membrane of croup, would seem to take place from some peculiar condition of the blood, together with, most probably, a deranged function of the nerves that distribute to the larynx and trachea. Some writers have raised the question as to whether the false membrane is exuded from the capillaries that distribute to the parts; or, whether it may not be a secretion from the follicular glands, with which that membrane is so abundantly supplied. The first is, however, the generally received theory and is probably correct. From whatever influence the membrane owes its presence, we know full well that it is not accidental, but is the result of some peculiar condition of the system occurring at, or within, a given age of childhood.

The blood, upon analysis, says Copland, contains an excess of fibrin and cressamentum, and the urine frequently albumen. Jones notices the fact that this disease usually occurs after weaning, or after the diet has been changed, and the food contains more albuminoid material.

The predisposition, in most cases, is probably hereditary, and the system is thereby rendered susceptible to influences or exciting causes, which, under other circumstances, would not engender the disease. All mucous membranes, and especially those largely supplied with follicular glands, are liable, under continued excitement, to exudations or morbid developments.

It has long been an opinion with me that membraneous croup depends primarily upon some condition of the blood, and secondarily, upon a deranged or disturbed condition of the laryngeal branches of the pneumo-gastric nerve. The pneumo-gastric nerve not only exerts an important influence upon the superior and inferior laryngeal nerves, and through them upon the larynx, but they also distribute to the stomach, and exert an important influence or function, in the secreting of the gastric juice and the processes of digestion. It will readily be perceived how changes in the digestive and nutritive functions might affect the pneumo-gastric nerve, and through it, reflect upon the laryngeal branches

sufficient to develop the necessary irritation in the capillary blood-vessels of the larynx and trachea; or this irritation might be reflected along the line of the spinal accessary nerve, which unites with the laryngeal branches of the pneumo-gastric.

The susceptibility to morbid impressions, or irritations of the larynx and trachea in childhood, and the alterations that they undergo, cannot of themselves be causes sufficient for the development of membraneous croup; for that susceptibility, to say the least, would be quite as great before, as after the period of weaning. It is rational to infer that the digestive organs of the child after weaning, and which are required to accommodate themselves to a much more highly nutritious diet, composed largely of albuminous materials, will frequently manifest derangements, and the blood also become excessively charged with a redundancy of some of the elements of nutrition.

Pathological Character of Membraneous Croup.

Microscopic examinations of the exudation of membraneous croup show: epitheluim proper to mucous membranes, mucous globules, fibrinous filaments, granules, and blood globules.

Bennett says: "The filaments are not the result of a development of a nucleus, or a cell, but are formed by simple precipitations of molecules which arrange themselves in a linear manner, in the same way as they may be seen in the buffy coat of the blood; as the exudation becomes firm the filaments become more distinct; bundles, or different layers cross each other, and as the lymph becomes older they assume, more and more, the character of those in dense fibrous tissues."

Rokitansky describes the mucous membrane under the exudation as variously tinted, but for the most part it is of a very pale color; it looks sore and excoriated, and is more or less swollen. Its surface is covered with numerous red, soft, bleeding spots, like granulations, which correspond to the vascular points on the adherent surface of the exudation. The sub-mucous tissues, especially the cellular tissue, appear infiltrated. Neither during or after the croup process does the mucous membrane suffer any material injury to its texture.

This exudation of plastic lymph varies in density and in quantity, and is deposited in stratified layers of different degrees of cohesion; they become moulded to the mucous membrane chiefly of the larynx and trachea; in some cases the fibres of this mem-

brane are firmly united and the substance so consolidated that they present the toughness of whit-leather, while at other times they are loosely connected, and in the interstice of the filaments there is deposited thick glutinous mucus.

Those cases in which a gelatinous or muco-puriform matter simply lines the larynx and trachea, are not cases of true membraneous croup.

TREATMENT.

Before introducing the subject of Eclectic treatment, I will briefly refer to some of the allopathic authors, in order that you may the better contrast the difference between the two systems of practice.

You will perceive that the "old school" practice is in the main in harmony with their theory of the inflammatory nature of the disease, and anti-phlogistic throughout.

In speaking of the views of allopathic authors, and their treatment of croup, I shall have reference more particularly to the membraneous type of the disease; as their writers acknowledge, properly speaking, but one form of the disease; and their pathological description of that form is very dissimilar; this last difficulty no doubt arising from their confounding the inflammatory and membraneous varities. Any physician who will take the pains to read the various publications of the old school upon the subject, will soon discover the very great difference of opinion among the several writers, with reference to the pathology of the disease.

Some of these authors, after describing the disease as an inflammation of the larynx and trachea, tell us, that dissection as a rule, reveals no alteration of structure of the mucous membrane of the parts, but simply an increased vascularity of the blood vessels; that the false membrane is frequently found detached from the mucous membrane of the larynx and trachea, as if in process of being exfoliated.

In the treatment of the disease by allopathic practitioners, bleeding at the present day is but little employed by American physicians; but cupping and leeching are still practiced by a considerable portion of the old school. Prof. Wood, after recommending mercurials, as also expectorants and emetics, such as antimony, squills, ipecac, sulphate of zinc, sulphate of copper, etc., would have them try nitrate of silver by the probang. Watson

recommends bleeding, tartarized antimony and calomel, he rather objects to blisters; his plan of treatment is first, bleed; secondly, give tartarized antimony as an emetic; thirdly, tartarized antimony in small and repeated doses, to produce a prolonged state of nausea; fourthly, mercury in small doses frequently repeated until green fecal discharges are produced. Copland's plan of treatment is in harmony with the old received notion of treating inflammatory diseases, and his remedies correspond with the authors that I have quoted.

Charles West in his late work on "Diseases of Infancy and Childhood," has devoted considerable space to the discussion of croup, but evidently gropes his way in the fog of his predecessors; and fails to throw much light either upon the cause, pathology or treatment of the disease. After recommending the warm bath, with emetics of antimony or ipecac, he would advise a more energetic course; he would bleed, and bleed quickly as possible; he would choose as a preference bleeding from the jugular vein; after the abstraction of blood, the free use of tartar emetic is at once to be resorted to—from one-eighth to one-quarter of a grain is to be given every ten minutes, until free vomiting is produced. The vomiting is to be repeated, and should the stomach cease to respond to the medicine, the dose is to be increased. If antimony fails to give relief, local depletion is to be resorted to; and possibly a repetition of general bleeding may be ventured on. From the very commencement of the attack, continues this author, mercurial ointment is to be applied every two hours, or, a flannel bandage, on which three drachms of mercurial ointment has been spread, may be swathed around the abdomen of the patient. Should all these means fail, he would recommend tracheotomy, but not with much confidence, as he has to record only one recovery out of sixteen operations.

With the exception of one recommendation in the commencement of his treatment, viz.: causing the child to inhale an atmosphere both warm and moist, he refers but to one sensible prescription, which he recommends to be tried during the stage of exhaustion, and that is a decoction of senega, combined with carbonate of ammonia.

In Dr. West's discussion of the treatment, he remarks: "It is not unintentional, nor from any oversight, that I have allowed my observations on the treatment of true croup to remain unaltered;

expressing the opinions that I formed, and the practice which I adopted five and twenty years ago."

It the late work of Prof. Austin Flint, sen., the treatment of croup is discussed somewhat in a negative sense. He rather advises what the practitioner shall not do, than what is necessary to be done. He remarks that heretofore the treatment relied upon has proved fatal in the vast majority of cases. He says that the measures employed have been based upon the supposition that the exudation depended upon the intensity of the inflammation. He regards depletion by blood-letting of more than doubtful propriety; he recommeds the cautious use of emetics, and those only to be employed that would act promptly, without producing prolonged nausea; antimony is excluded from the list of emetics, and ipecac and sulphate of zinc are among the articles he would employ. The object of emetics is not in any way calculated, according to his view, to detach the membrane or hasten its removal, but simply to remove viscid mucus, and supply the function of expectoration. He says that mercury is admissible, and the objections to its use are not to be considered when so dangerous a disease is present, but adds that it must be prudently employed. He evidently would prefer leaving the patient to the efforts of nature, having nothing new to suggest, and knowing full well that the remedies heretofore employed only lessen the probability of a recovery. He hints that the topical application of nitrate of silver, as recommended by Dr. Green, may be tried, but admits the difficulty of introducing the probang into the larynx and trachea of a child owing to the small size of the rima glottidis.

I now come to consider Eclectic treatment, and to sustain, if possible, what I honestly believe to be a fact, that our treatment of this disease is superior to that of the old school, and most probably of any other school of medicine.

I will not premise this treatment by assuming the premises that membraneous croup is a disease easily controlled; or that we have positive medicines that are specific, and that may be relied upon in every given case; but will only claim for our practice in this disease, as in many others, a superiority. The issue of events has brought the acknowledgment from some of the latest and best authors of the old school, that their remedies are based upon a wrong conception of the nature of membraneous croup, and hence are worse than useless. The success of Eclectic practitioners grows out of the fact that they deny the utility of *anti-phlogistic*

treatment to subdue inflammation; even admitting that membraneous croup is an inflammatory disease; and also from the fact that their remedial agencies are selected chiefly from the vegetable kingdom, and their discoveries in that direction are in advance of any other system of practice. Our own experience, and the testimony and experience of our reliable men throughout the United States, justify us in stating that there are articles in the materia medica which, if properly selected and applied, will not only arrest the development of the disease in most instances, but bring it to a healthful termination.

The question then would arise, what is the best plan of treating the disease, and what are the remedies that are the most efficient and reliable?

In discussing the treatment I shall not detain you with any suggestions with reference to the treatment of spasmodic croup. The simplest form of treatment is all that is required, and I have referred sufficiently to the subject for all practical purposes, in a previous part of this paper.

The treatment of inflammatory croup requires a more determined and persevering effort than the spasmodic. It should be treated upon the general principles that are indicated in other inflammatory diseases. One of the best remedial agents in the whole materia medica, is the veratrum viride; this remedy, with repeated mustard foot-baths, will steadily subdue the urgency of the symptoms. I very much approve of the plan of causing the patient to inhale a moist, warm atmosphere, by causing steam to exhale in the apartment. To allay the spasm of the cough, and relax the constricted condition of the air passages, a syrup made from the acetated tincture of lobelia may be employed, or the compound syrup of senega, a formula of which will be hereafter given. In very severe cases, flannel cloths, wrung out of hot water, and applied to the throat, or a poultice composed of flax-seed, stramonium leaves and lobelia may be applied warm, and repeated. If the spasm of the glottis should be considerable, a preparation of lobelia and sanguinaria, or the compound syrup of senega may be given in sufficiently large and repeated doses to produce vomiting.

I now come to consider the treatment of the third variety of the disease, *membraneous croup.* It is seldom that we are called to a case of membraneous croup, until the exudation has fairly commenced; in most cases the patient is in a critical condition before our advice is sought. The first object of treatment should be to

remove urgent symptoms, should such symptoms present; and second, to change as far as possible the condition of the system upon which the exudation depends. Upon being called to a patient, we may find the larynx and trachea filled with a thick tenacious mucus, which for the time being, obstructs the passage more than the presence of the membrane. In such cases, give immediately an emetic of the compound powder of lobelia, or the compound syrup of senega, every ten or fifteen minutes, until free vomiting is produced. You can only hope to secure temporary relief from the emetic, for the membrane is gradually forming and consolidating; and no time should be lost before other means are put in force. Direct for the patient immediately, a strong mustard foot-bath; arrange the temperature of the room, and create a moist atmosphere, by causing steam to escape from some vessel containing boiling water; enclose the patient closely in a flannel blanket, and administer the compound syrup of senega of my formula; or the acetated tincture of sanguinaria, combined with syrup senega, or a carefully prepared acetated compound of lobelia and sanguinaria. Whatever preparation you use, combine with it sufficient amount of the tincture of veratrum viride, to gradually lessen the heart's action, as also to produce its peculiar effect (which it always does to a greater or less extent) upon the mucous membrane of the trachea and larynx. These medicines are not to be given in quantities sufficient to keep up nausea, but for the purpose of overcoming the excitement of the nerves, and the vascularity of the blood vessels of the throat. They should be administered every half hour or hour, according to the urgency of the case, and continued so long as the patient is in danger.

When nature unaided by medicines, cures membraneous croup, as I verily believe she would do much more frequently than by the old form of allopathic dosing, she does it through a gradual subsidence of the irritability and vascularity of the mucous membrane; the false membrane becomes gradually loosened and exfoliated off, and is either vomited up, or passed off by expectoration. The object of the practitioner then would seem to be, to lessen the vascularity of the mucous membrane of the larynx and trachea; to allay the nervous irritabillity of the laryngeal branches of the pneumo-gastric nerve, and to prevent exudation upon the mucous surface, by restoring to a healthy tone the capillary blood vessels of the parts. It is evident that the capillaries in membraneous croup become too relaxed, or altered in their nature, that their

liquid contents are virtually exuded, and coagulate and concrete upon the mucous surface of the larynx and trachea. If we can change this condition of things by restoring healthy nervous influence to the parts, the calibre of the vessels will be so altered that their liquid contents will be retained and transmitted as in health.

Beneficial effects may sometimes be obtained from external applications. They should be selected either with reference to their relaxing or counter-irritating properties.

Dr. R. S. Newton gives the following formula in his work on diseases of children.

R.	Ol. Stillingia,	dr. i.
	Ol. Lobelia,	drs. ii.
	Alcohol,	drs. vi.
M.		

The throat and neck is to be bathed with this, three or four times each day, after which a fomentation should be applied, composed of two parts of hops and one of lobelia, which are to be boiled in vinegar and water.

There is a formula in the Eclectic Dispensatory which was furnished by Dr. R. S. Newton under the head of linimentum stillingia compositum, which I should judge from the nature of its ingredients to be good, but have never tried it. In the absence of other applications to the throat, a flannel bandage should be applied, and worn until the disease has entirely disappeared.

The following is the formula for the syrup senega compound or croup syrup, which I have been in the habit of employing with signal success. After an experience of over twenty-one years in its use, I can recommend it with confidence to the profession :

R.	Senega Snake root,	oz. ii.
	Squills,	
	Blood root (of each),	oz. i.
	Pleurisy root,	
	Lobelia Herb (of each),	oz. ss.
M.		

Use as a menstruum good old hard cider, or cider vinegar diluted; make a syrup after the usual form, only much more concentrated, say of twice or three times the strength. To this I add a small quantity of the tincture of veratrum viride, so that the child may get from one-fourth to half a drop at a dose, unless the sthenic nature of the disease should justify a larger dose.

The usual dose of the medicine is, one tea-spoonful every fifteen minutes, to one hour, according to the urgency of the symptoms. As an emetic it should be given every ten, or fifteen minutes, until free vomiting is produced.

Before leaving the subject I desire to say a word with reference to the therapeutic properties of the remedies I employ. When I say, *I employ*, I do not wish to be understood as being the only individual who has tested this medicine, for there are others who have employed for many years the same remedy, among whom is our worthy president. The articles named in this compound are familiar to all Eclectic physicians, and have been used singly, and in varied combinations, for the same disease. I am sometimes asked the question, is not the blood root the only reliable remedy in the compound; or, are there not a superfluous number of articles in the medicine? My answer is, I think not; if I should dispense with any, it would be the asclepias tuberosa, but I have never done so. The original receipt contained garlics, which I discarded as I wished to lessen the number of ingredients, but I am not certain that in so doing I did not lessen the value of the remedy. Another objection might be urged, that I employ remedies the therapeutic properties of which antagonize; the senega and squills which are pulmonary stimulant, and will tend to quicken the circulation, while the veratrum viride will act directly to the opposite. I grant this, but while these remedies are opposite in their influence in one particular, when used in connection in this complaint (*as in some others*) they both tend to remove the disease. Who of us has not found beneficial effects in pneumonia by combining, stimulating expectorants with veratrum viride. I have raised a number of individuals which I should have lost, had I not employed senega, brandy, and carbonate of ammonia in alternation with veratrum viride.

The veratrum viride, when employed in croup, lessens the excessive vascularity of the part; while senega quickens into healthy circulation the capillary vessels of the mucous surface; they all, by their expectorant properties, assist in detaching the false membrane from the mucous surface, that it may be ultimately vomited up or removed by the process of expectoration. The lobelia is well known to possess unequaled anti-spasmodic properties, and in conjunction with the other remedies will not only allay the muscular excitement (which excitement no doubt tends to increase the circulation of the parts), but will tend greatly to

break up the unnatural nervous influence upon which no doubt to a great extent the disease depends. The remedies being conveyed in an acidulated menstruum may tend somewhat to prevent the coagulating and concreting of the exudation.

You will observe that I have failed to speak of inhalations as therapeutic means; but having had but little experience in their use, and my paper being already too long, I shall leave those for the society to discuss; as also the propriety of topical applications and tracheotomy.

In conclusion allow me to notice that there is an analogy between my experience and that of Dr. Charles West in one particular. I have employed the remedies that I now recommend for nearly a quarter of a century, and my faith in their utility is still unchanged; and I advocate the same principles of practice, and in most of instances the same means I did twenty-one years ago. There is, however, this difference with us: the development of science has confirmed the principles that first directed my treatment; while in the case of Dr. West, he must do violence to his judgment if he is not yet compelled to acknowledge his error.

ARTICLE XX.

An Essay on Dropsy. Read before the Brooklyn Academy of Eclectic Medicine
By M. HERMANCE, M. D.

Mr. President and Gentlemen of the Society—I will invite your attention for a brief portion of this evening's time to the consideration of that abnormal condition of the human system, termed by medical writers Dropsy. It is supposed to be that state of the system in which the serous membranes secrete their fluid in such excess that the ordinary powers of absorption are inadequate for its removal. In one sense, and under certain conditions, such a definition may be correct, but I can conceive of many causes that could and would produce a dropsical accumulation in the various parts of the organism, that would produce a far different condition from that first specified; as, for instance, that condition of excessive debility of all the tissues of the body, which so frequently supervenes on the slow and apparently uncertain recovery from some serious malady that has exhausted the powers of life to such degree as to diminish all the secretions—the serous membranes as well as the absorbents; while, at the same time, it weakened the tissues so much that they were unable to force the fluids along in the course of propor circulation. It is very evident to my mind, from my mode of reasoning, that there may be perfect disproportion between the secretion and absorption of the serous fluid, and yet, at the same time, there exist no excess in the process of secretion, but the lack of balance, so to speak, being wholly in the absence of absorbent power, resulting either from some obstruction in the eliminating vessels or organs, in consequence of which they were unable to dispose of the fluid secreted in a natural manner; or the defect of action may consist in such a state of the absorbent vessels themselves, that they may not be able to perform their proper function. In either case we would find an accumulation in excess of the serum in whatever part of the organism such conditions, or either of them, might be produced from any cause whatever.

Then we may have a dropsical accumulation as the result of all these conditions existing at one and the same time.

I regard a proper understanding of the above mentioned causes and conditions, as essential to the successful treatment of this so often troublesome sequent of so many forms of disease.

While all medical men seem to be aware that the removal of the superabundant fluid is necessary for the cure of dropsy, there are many practitioners—judging from the result of their treatment—who place too much reliance upon that, which in most cases is the least part towards a cure. They appear to overlook the fact, that the watery accumulation is not the disease, but rather, and only the indication that the machinery is out of repair; and when they have drawn off the fluid by tapping externally with the trocar and lancet, or internally with their hydragogue cathartics, they have done only the least part towards restoring their patient to health; and often, very often, what they have done, has injured rather than benefited their patient. The removal of fluid very frequently restores the patient at once to comparative comfort, in consequence of its removing the various symptoms and embarrassment of important functions, which were caused in whole or part by the imprisoned liquid, and constituted the greater part of the patient's distress and danger. The relief thus obtained would often lead the patient to think he was restored to a state of health, and the physician to believe that all that was required more, was for the patient to recover strength; although the original cause, of which the dropsy was but a symptom, may remain behind untouched, to be again productive of the same consequences.

When, as sometimes happen, the bodily change which is the immediate cause of the dropsy, is slight or temporary, nature will restore without any farther aid, the balance of action, after it has been relieved of the fluid. But, when the condition is more permanent and serious, there is much left yet undone, as far as a cure is concerned, after the fluid has been all removed. The functional derangement of the secretory and absorbent vessels is often the most difficult part of the process of cure to perform; and then, in other cases, the abnormal condition of some one or more of the vital organs, makes the case utterly incurable.

Presuming that you are all familiar with the technical terms that medical writers have made use of to designate the particular locality in which the effusion may exist in each particular case, I pass over that part of the subject, as I do not desire to consume the time that can be more profitably occupied by other members

of the society, and will close with a few suggestions as to the treatment, which in my judgment, is best adapted to cure, when the conditions of the case admit of so satisfactory result of treatment; or to alleviate to the greatest extent the urgent symptoms and sufferings of the patient, when the case is not a curable one.

It is needless for me to remark that the removal of the abnormal accumulation of fluid is necessary in order to either relieve or cure the case, for it is taken for granted, that so prominent an indication would not be overlooked by any one, not even the patient; but the means by which a removal of the fluid can be effected is a subject about which there will most likely be a diversity of opinion. There are certain things to be taken into consideration in every case, as forming a basis upon which to start a course of treatment that will be in harmony with the laws of nature, and calculated, so far as art can be adapted, to effect a cure.

In determining as to what course of treatment is best adapted to the case before us, when called to a case of dropsy, it is highly important that we take into consideration and give its proper weight and importance to each and every particular that may influence, not only the existing organic condition, but also the original and predisposing cause. The means that are usually relied upon for the relief and cure of the disease under consideration, are cathartics, diuretics, sudorifics and tonics.

It is very evident, from the nature of the disease and the indications of cure, that the remedies, or at least many of the medicines belonging to the four classes named, must be of great value; as, without their peculiar effects, it would be difficult if not altogether impossible to rid the system of the accumulated fluid. Yet we often find cases in which cathartics and diuretics have been used to the fullest extent the constitution would admit, and yet have no permanent result towards curing the disease; and many times the process of sweating only relaxes still farther the tissues, and thus invites and facilitates a greater accumulation. As to tonic medicines they are of but little use in any but very mild cases, until after the bloating has been removed, and the structures of the diseased parts have been put into a condition suitable to functional action.

Experience has taught me that while we can almost universally remove to a great extent the dropsical effusion, by the administration of hydragogue cathartics, there are cases frequently met with where their use is utterly inadmissible; and no matter how much

we may desire their aid, we cannot with safety avail ourselves of it with safety to our patient, in consequence of the peculiar condition of the system, which circumstance compels us to resort to some other class of agents to relieve the case; and, as prominent indications direct our attention to the kidneys, as the important outlet established by nature for the elimination of water, we ply the system with those medicinal agents that have a special relation to those organs, and which, under ordinary circumstances, tend to increase to a very great extent the secretion of urine; but perhaps, in the case under treatment, we find after plying our patient freely with diuretics for several days, not only no augmentation of the secretion of urine, but on the contrary a great increase of the bloating, and aggravation of all the symptoms. I have known physicians of standing to renounce the case as incurable under such circumstances, with the conviction that diuretics could not be made to act, and cathartics were inadmissible; and it is for the purpose of suggesting a method by which the practitioner can extricate himself from the unpleasant dilemma, as well as to relieve his patient from suffering and perhaps an untimely grave, that I have selected this subject for the foundation of my remarks this evening. Perhaps what I am about to say will not convey much, if anything, new in the way of treatment, to the older members of this society, but to the younger members it may prove of great value.

The combination to which I would call especial attention is the union of some powerful vegetable astringent with the diuretics, that you may consider best adapted to fulfill the indications in the case. I have seen the very best of results secured by combining or using in conjunction with the same diuretic compound, that had signally failed when used alone, and I consider it of great value to combine some pungent stimulant with whatever other remedies are used for dropsy.

Stimulants quicken the circulation and increase absorption, and the astringents contract the muscular tissues, and in that manner act as a propelling power to force the fluid from the cellular tissues, and overcome that laxity of the parts, always existing in œdematous condition, thus preventing the re-accumulation.

A favorite plan with me, and a very successful one, is to first put the patient under the influence of a gently stimulating and sudorific course of treatment for a short time, in order to arouse the dormant action of the system, and then I put my patient under

the influence of a pill composed of equal parts of capsicum and bi-tart. of potassa; giving one pill every two to four hours, as the case may be seen to require, alternating with the pills, a powder composed as follows :

Apocynin,	grs. x.
Sach Lach,	grs. c.
Mix, divide into chart,	xx.

Give one every alternate hour or two with the pills. I generally keep my patient under the influence of these remedies for from one to three days, or until a perceptible effect upon the kidneys is produced, and a decided increase of urine is perceptible; then I commence with the use of tannin in drachm doses, or in other words, I put a drachm of tannin in a tumbler, and add to it one-half a gill or so of port or some other rich wine, and direct my patient to take one table spoonful, if an adult, often enough to take the whole in three hours, when I direct another drachm of the tannin to be prepared and taken in the same way, to be followed up with a repetition until several drachms have been used, or the reduction of the bloating takes place. It is astonishing how quick the above course of treatment will rid the system of all dropsical accumulation, unless it depends upon some serious organic disease. My usual course, after ridding the system of the water, is to put my patient under a thorough course of alteratives and tonics; aided when necessary, by the vapor bath, to restore the function of the skin, and establish permanently the perspiration. I have not designed to burden you with a long list of prescriptions that might be more less valuable in the disease under consideration, consequently I have said little about the combination of particular remedies, but rather chose to advance a principle, that can be made use of in any prescription, and leave you to carry it out in practice—selecting your agents from your own favorite remedies.

The prescription I gave was merely to illustrate the principle, as I apply it for the accomplishment of the object desired; I now leave these views of this disease, with the plan of treatment suggested, with the society, for their discussion, and for any improvements which they may suggest.

ARTICLE XXI.

Schneiderianitis. An Essay read before the Brooklyn Academy of Eclectic Medicine. By Wm. Brown Warner, M. D.

Gentlemen—The subject to which I would call your attention this evening, is Schneiderianitis or catarrh of the head, a disease which prevails to a great extent throughout this country and Europe. It is known by a copious discharge of mucus from the nostril, or, accumulating on the roof of the mouth, it drops into the throat, and is hawked up and spit from the mouth. In the course of my travels I have seen thousands who were affected with this disease, and I have judged that at least one-half of the human family are more or less subject to it. In 1849, I traveled extensively in many States. I paid a flying visit to nearly all the villages, towns and cities of the six New England States. I visited all the manufacturing establishments in these various places, especially the cotton mills of Saco and Biddeford in Maine; of Dover, Manchester, Nashua, in New Hampshire; of Lawrence, Lowell, Lancaster, and Chicopee Falls, in Massachusetts; and the cotton and woollen mills of Rhode Island. The axe factories in East Douglass, Massachusetts, and the comb factories situated in the towns through which the Providence and Worcester railroad runs, and nearly all the foundries and machine shops in these six States; and I found a greater part of all the operatives suffering with this disease. More than half of all shoemakers are victims to it. I noted these facts more particularly because I have suffered with it myself, from my earliest recollection. Years ago I began to look for the cause of, and a cure for, this disease. I applied to many of the best physicians, and while many agreed as to the cause, none were able to prescribe a remedy which would produce a permanent cure. In 1849, I began the study of medicine, and this was the first disease to which I directed my study. The first medical work that fell into my hands was the American Physician, a little volume written by Elias Smith, of Boston, in 1837. On page 156, he says of catarrh:

"This word means to flow down, or a fall of water. It is an increased secretion of mucus, from the membranes of the nose,

fauces and bronchial tubes, with fever, and attended with sneezing, cough, thirst, lassitude and want of appetite. What is commonly called the catarrh, is nothing more or less than water in the head, which drops down instead of passing off in the natural way. When the man is well, the useless water passes off by sensible or insensible perspiration and by urine, etc. If there is not heat enough to carry the water off through the pores of the head, it falls down; if there is not heat enough for this, the water stops, and then the person is said to have dropsy in the head. This is the origin of catarrh." He goes on to say: "I have attended many people who were troubled with catarrh; when their other difficulties were removed, the catarrh has always gone with them." Wooster Beach, in his Family Practice, on page 503, says, under the head of catarrh:

"The glands and membranes of the head secrete a fluid to keep the mouth, nose and eyes moist; from cold. debility, and other causes, it is liable to become obstructed, in which case this liquid is secreted too copiously, when it is called a catarrh. The liquid which flows from the nostrils make the eyes tender, irritates the mouth and other parts over which it passes, and sometimes collects in the throat and almost chokes the person. It may last for years and cause pain in the eyes, cough, drowsiness, and emaciation."

On page 350, of catarrh, or influenza, he says: "This is an epidemical disease which occasionally prevails, and sometimes affects nine-tenths of the inhabitants of Europe and America. It is an increased secretion of mucus from the membrane of the nose, mouth, and brochial tubes, with fever, and attended with sneezing, cough, thirst, lassitude, and want of appetite. A species of catarrh to which the name influenza has been applied, sometimes makes its appearance, and considering the manner in which the epidemic infection of this disease occasionally spreads even over whole countries in the space of a short time, it is evident that it is conveyed by a current of atmosphere, and derives its origin from some casual source, capable of impregnating the air which we breath with the specific poison of the malady." On page 189, of Warren's Household Physician, we find the following remarks:

"Nasal catarrh consists in inflammation, which begins behind and a little above the veil of the palate, and extends upward from thence into the nose. It is an exceedingly troublesome complaint, and it affects great numbers. It passes under the name catarrh of the head. The inflammation is not confined to the nasal cavities.

It extends frequently to the air cavities called antrum and sinuses, which cover a considerable portion of the face and extend to the lower part of the forehead. Persons sometimes feel as if their whole face were involved in the disease, and was almost in a state of rottenness, so great is the amount of matter discharged from the head. Such free discharges cannot be wondered at when we reflect that all the air cavities of the face are lined with the same mucous membrane which lines the nose, and that they all communicate with the nasal cavities. Catarrh often creates a perpetual desire to swallow, and gives the feeling, as patients express it, as if something were sticking in the upper part of the throat. When the inflammation has existed a long time, and ulceration has taken place, puriform matter is secreted and drops down into the throat, much to the discomfort of the patient. Indeed, this is one of the most distressing features of the complaint, as this matter often descends into the stomach, in large quantities, causing frequent vomiting and a general derangment of health. Many times the sufferer can only breathe with the mouth open; upon rising in the morning an effort is made to clear the throat. There is occasionally a feeling of tightness across the upper part of the nose; and the base of the brain sometimes suffers in such a way as to induce headache, vertigo and confusion. The smell is frequently destroyed and sometimes the taste. The inflammation sometimes gets into the eustachian tubes, the mouths of which are behind and a little above the veil of the palate, and extends up the lining membrane to the drum of the ear, causing pain and deafness, and occasionally both. In addition to this list of evils, there is often added inflammation and elongation of the uvula or soft palate."

On page 413, of Paine's Practice of Medicine, he says of catarrh: "It consists of an acute inflammation of the mucous membrane of some portion of the air passages. When the schneiderian membrane of the nose is affected, the catarrh is styled coryza; if the frontal sinuses be the seat of disorder, gravedo; and if the trachea and bronchi be involved, it is designated as bronchitis. Catarrh is a common disease, and arises from repeated colds, damp apartments, wet feet, insufficient clothing, hot rooms, a sudden check to perspiration, snuffing tobacco, and various other imprudences. A rheumatic or scrofulous condition of the system predisposes to an attack.

Professor Robert S. Newton, in his Eclectic Practice of Medicine, on page 559, says of catarrh: "This form of disease, though

very frequent and often troublesome, scarcely needed a formal notice; it very rarely does, directly, much mischief, as everybody has remedies for it which are generally efficacious; we notice it merely because it is an affection which is probably more common to early than to adult life, because the mucous tissues are more vascular in the former period than in the latter."

Catarrh, when unattended by any other word to give it a special signification, is used to designate an inflammatory affection of the mucous membrane of the respiratory passages.

It is difficult to determine why a catarrhal inflammation should be generally diffused in this mucous membrane, while those of which we shall treat should, in a very great degree, be confined to particular portions of it. In catarrh, the cause appears to be general, while in other forms of disease of this membrane, it seems to be specific. The facts connected with catarrh give it the character of a vicarious function rather more than that of a disease, which is really in some other part. Cold, acting upon the skin, under certain circumstances, so as to check it secretions, produces catarrh. The same is very frequently verified of the mucous membrane of the alimentary canal; a want of secretory action in this membrane often results in catarrh. The manifestations of disease in special portions of the respiratory membrane must be accounted for by a reference to special predispositions, or to specific causes.

Sneezing, though frequently occasioned by other causes than those of catarrh, is very frequently the first indication of an assault by the latter, to which succeeds, very rapidly, coryza, laryngitis, trachitis, bronchitis, and lastly, the tubes of the bronchia are involved; but it may commence in the bronchial tubes and travel in the contrary direction.

In general, the grade of inflammation is low, and about equal in all the parts assailed. Its seizure upon the pulmonary ramifications of the bronchia is apt to induce catarrhal fever.

When the catarrh is of a pretty violent character, it is quite apt to make a special assault upon the lining membrane of the nostril, producing ozena narium, from which is discharged offensive and often bloody matter; or it may specially assail the superior maxillary sinuses, producing ozena antro-highmori; in either event much pain will be complained of until the ulcers break. It is often difficult to cure these ulcers, and much time is usually required for it.

From experience, observation and reading, I have come to the

opinion that catarrh is a disease which prevails to a great extent throughout Europe and America. It is more extensive in cold than warm countries; it is more frequently met with in New England and middle States than in the south and west. Those who pursue in-door pursuits, and are confined to the heated air of cotton and other mills; those who are breathing an atmosphere loaded with dust of any material, are victims of this disease. From the fact that it leads to such serious effect, producing bronchitis and consumption, with their train of evils, and so often defies the skill of the most eminent physicians, I believe we should pay more attention to its treatment. Almost all medical works speak of it, as though it were a slight disorder, easily cured. I have known hundreds affected with catarrh, who have tried everything spoken of, as remedies, but they have been unsuceessful in obtaining a cure. In my own case, I have tried the various remedies spoken of by Smith, Beach, Warren, Newton and Paine, but the trouble still continues. I have a niece who has this disease, who submitted to Warren's treatment for six months, and gave it a fair trial. She grew worse, instead of better, very fast. At the end of this time I felt it to be my duty to advise her to stop the use of nitrate of silver, and resort to warm, nasal baths. This relieved her to such an extent, that she has resorted to it every few days from that time to the present. Within the last two weeks some seven persons have applied to me for remedies for catarrh. To be honest with them, I am obliged to tell them that I know of no permanent cure, for as long as they are in a cold and changing clime, it will continue. Many eminent physicians have told me that they considered it incurable, and I have almost come to that conclusion myself.

In Wood's Practice of Medicine, vol. 1st, page 807, we find as follows: "This name (catarrh) was formerly applied to disease of the mucous membranes generally, attended with increased secretions. At present, however, when not connected with some epithet fixing its locality elsewhere, it is confined to inflammation of the respiratory passages. Each portion of these passages gives a distinct name to the inflammation, with which it may be affected. Hence we have coryza, angina, laryngitis, bronchitis. But it often happens that, in the same attack, all these parts are successively or simultaneously the seat of inflammation, which, therefore may be said to constitute one disease. For this in its full extent we have no other name than catarrh. Some writers consider catarrhal

inflammation as peculiar or specific, characterized by slightly increased vascularity, afflux of the circulating fluids, and augmented secretions. I have never been able to discover anything specific in its character.

The inflammation which begins with increased secretion in the nostrils, very often becomes dry when it reaches the throat or bronchial tubes; and yet it can hardly have changed its nature. There is a certain grade or stage of inflammation in the mucous membranes, on which they are disposed to copious serous or thin mucous secretions, and what these writers designate as catarrh differs from other examples of inflammation only in this respect. This disease usually begins in the nostrils with coryza, then invades successively the fauces, larynx, trachea and bronchi, and finally loses itself in the ramifications of the last mentioned tubes. Sometimes, especially in children, it penetrates to the vesicular structure of the lungs, and constitutes pneumonia.

Not unfrequently, also, the inflammation commences in the fauces or larynx, and runs downward, and in some instances, making its first appearance in the the bronchial tubes, it extends upwards as far as the nostrils, giving rise to coryza. The grade of inflammation is apt to be nearly the same throughout this course, unless modified by treatment. If the coryza or angina be light, the chances are that the bronchitis will be light also, and *vice versa.* Some of the worst cases of bronchitis begin as intense inflammation of the faucus, extending to the sub mucous tissues; when the disease reaches the chest, and is attended with febrile symptoms, it is called catarrhal fever. It is unnecessary to treat of the symptoms of catarrh. They vary with the part or parts affected, and have been sufficiently described under the preceeding heads. When severe, the complaint is almost always attended with fever; and even when slight it is not unfrequently thus attended, if it occupy simultaneously a great extent of the respiratory passages. The treatment has been already fully detailed. Thus, when the disease occupies the nostrils it must be treated as coryza; when the fauces, as angina; when the larynx, as laryngitis; and finally when the bronchi, as bronchitis.

It is only necessary to state here that it is often highly important to arrest the disease, or diminish its violence, in its earlier seat, so that it may either not reach the bronchia at all, or reach them in a mild form. Hence, the propriety of attacking inflammation of the nostril and fauces more efficiently than if the com-

plaint were to be confined within these limits. Attention to this suggestion may often prevent a long continued, if not serious, attack of pectoral disease.

In the cases of individuals subject to frequent and severe attacks of catarrh, it is sometimes very desirable to meet the disease upon the threshold and turn it aside if possible. This is true in whatever portion of the air passages it may make its first appearance. The means calculated for this purpose are, chiefly, a large dose of opium at bedtime, and the production of a copius and continued flow of perspiration. For the modes of carrying these measures into effect, and the cautious necessary, the reader is referred to the article on coryza."

Cause.

We may conclude that catarrh is caused by colds; as a sudden check to perspiration, produced by damp apartments, wet feet, insufficient clothing, etc.; sudden changes in the temperature of the air, dust floating in the atmosphere, alcoholic drinks, tobacco, snuff. I have no doubt that the chewing and smoking of tobacco has often produced this disease. Dr. Beach, says it often derives its origin from some casual source capable of impregnating the air which we breathe with the specific poison of the malady. I have no doubt that the inhalation of miasmatic poisons, arising from the decompositions of vegetable and animal matters has often produced the difficulty. I have noticed that persons residing in damp or wet localities, and those who occupy the basement apartments of tenement houses, were more subject to this disorder, than those who reside in dry localities, and the upper tenements of such buildings. Coal gas is a frequent cause of catarrh; and other acrid vapors or irritating powders frequently produce this trouble. A scrofula diathesis, or that condition of the system which results in scrofula, salt rheum and other eruptive diseases, seems to predispose the person to catharrhal affections.

Symptoms.

Cold chills, pain in the head, frontal headache, pain in the eyes, drowsiness, inflamed, dry and swollen condition of the mucous membrane of the nasal cavities, inability to breath through the nostrils, a stuffed up feeling as patients express it, followed by a copious secretion and discharge from the nostril of mucus, which irritates the parts over which it runs, producing inflamma-

tion and excoriation. Copious secretions of mucus follow, which is discharged from the nostrils, or collecting in the sinuses of the head, drop into the throat while the patient sleeps, and on arising in the morning, a great effort is made to clear the throat; this mucus is hawked up and spit from the mouth. There is frequently a feeling as if something was sticking in the upper part of the throat. So great is the secretion of mucus in some cases, that patients are spitting it from the mouth constantly. Nausea and vomiting frequently attack the person in the morning on arising from bed, produced undoubtedly by the mucus that has collected in the throat and esophagus, passing down into the stomach. Cough, lassitude and emaciation often attend this complaint, followed by bronchitis and consumption.

TREATMENT.

This is the important part of this subject. On looking into the books, I find many remedies spoken of. I try them, and they fail to bring permanent relief; patients become discouraged, denounce the physician and all remedies, and stop their application. Prof. Wood says: "Most cases of this disease are so mild as not to require medical treatment, and scarcely to interrupt the avocation or pleasures of the patient." He might have added that the more severe cases do not interfere with the avocation or pleasure of the patient; but it is a constant annoyance, causing them to cough, hawk and spit, or clear the nostrils of mucus, every few moments throughout the day. It is this feature of the complaint that induces the most of patients to seek relief. Prof. Wood prescribes, when there is no fever, a dose of sulphate of magnesia, abstinence from animal food, and the avoidance of exposure to cold and wet. If obliged to leave the house, he should clothe himself warmly, take care to keep his feet dry, and protect the nostril by a handkerchief, against the cold. In more severe cases he adds a hot pediluvium, made more stimulating by the addition of common salt or mustard, and the use of refrigerants and diaphoretics, as citrate of potassa, acetate of ammonia, nitre and tartar emetic, variously combined to suit the circumstances of the case. If the disease do not yield to the above treatment, he resorts to bleeding from the arm, or application of leeches to the forehead or cheek, or drawing blood from the nostril. He says various measures have been recommended to relieve the local symptoms, which are often very distressing. Dr. Physick was in the habit of advising the frequent

inhalation, through the nostrils, of the vapor of a mixture of laudanum and Hoffman's anodyne. Mr. Harrington, a dentist of Philadelphia, has found the affection in several instances, to disappear at once and completely, under the inhalation of chloroform. A lump of camphor held near the nostrils sometimes affords relief. I know an individual who derived prompt relief from snuffing up powdered cloves. Powdered cubebs have been recommended in the same way. Steaming with the vapor of hot water, snuffing powdered gum arabic up the nose, the injection of oleaginous liquids with some narcotic ingredient, and the direct application of the vapor of acetic acid, are also among the measures occasionally resorted to.

M. Deschamps has found a solution of extract of opium, made in the proportion of about a grain to a fluid ounce of water, and drawn into the nostrils by inspiration, promptly effectual. One nostril is to be closed with the finger and the liquid drawn in through the other, until felt to be about to enter the fauces, when it is to be allowed to flow out again. The application may be made every two hours if necessary, but seldom requires to be more than once repeated.

Dr. J. H. Duglass, of New Orleans, cures the severest coryza by causing the patient to snuff a little laudanum up the nostril, taking care that none is swallowed, and following this measure by a brisk cathartic.

Dr. John A. Lockwood has found the application of a solution of nitrate of silver, containing eight or ten grains in the fluid ounce, applied by means of a camel's hair pencil to the mucus membrane of the nostril, at the beginning of the attack, a sovereign remedy. Injections of a solution of sulphate of zinc, of the strength of two or three grains to the fluid ounce of water, have also been used. The patient will derive comfort from applying some stiff, mild, fatty matter, as suet, or spermaceti, or cerate, to the upper lip and nasal orifices, in order to protect them against the irritating secretion. He should use a soft linen handkerchief. Sometimes violent exercise will of itself throw off an attack in its earlier stage, by promoting perspiration. Careless persons often produce the catarrh in this same manner, by allowing the perspiration to be suddenly checked. If the complaint have the intermittent form it may be readily cured by sulphate of quinine.

In infantile cases it is necessary to feed the child by means of a spoon. Relief may sometimes be afforded by holding a sponge

wet with warm water upon the nose. Dr. C. D. Meigs recommends strongly as a very effectual remedy, to cover the head with a closely fitting flannel cap.

When an individual is subject to the complaint in its severer forms, and especially when previous experience suggests that it is likely to be the precursor of a protracted disease of the chest, it is important to be able to set the attack aside at its very commencement. This may often be done by a full dose of opium. From one to two grains of opium, or from ten to twenty grains of Dover's powder, may be given at bedtime; and the patient will often awake in the morning free from the disease. An aperient may sometimes be advisable to correct the constipating effects of the opium.

Another mode of obtaining the same end is to produce a copious diaphoresis, by soaking the feet in hot water, and administering copious draughts of some hot herb tea, as of balm, sage, or hoarhound, at bedtime. This plan will be still more efficacious if some nauseating diaphoretic be added, as ipecacuana or tartar emetic. A hot infusion of eupatorium combines these advantages. If it operate as an emetic, the success will be still more certain. Care, however, must be taken by the patient not to expose himself to the cold air the next day. I have known severe pneumonia result from a neglect of this precaution.

It is very desirable to be in possession of a prophylactic against this troublesome affection. I know of none so effectual as the daily habit of washing the head and back of the neck in very cold water, or where wet feet are the ordinary cause, to dip them in ice cold water every morning. It is best to begin with this plan in warm weather and persevere through the winter. The cold shower bath is also recommended.

Dr. Elias Smith, of Boston, says he cured the catarrh by administering his vegetable powder; if these fail a lobelia emetic. These powders are compounded as follows:

Bayberry bark,	lb. i.
Ginger root,	oz. viij.
Capsicum,	oz. iv.
Hydrastis, con.,	oz. ij.
Valerian,	oz. i.

Powder, mix and sift through a fine sieve. Dose, a teaspoonful, with one of sugar, in one gill of hot water. Not long since a lady

told me she was cured of catarrh by taking these powders, as follows: A teaspoonful in one pint of boiling water, well sweetened, let it stand until it got cold, then take a table spoonful six or eight times a day, and continue it some weeks.

Wooster Beach says: Bathe the head and shoulders in cold water and use the cephalic snuff. If these do not cure, use the following, which I have found a very valuable remedy: Take common sage, a tablespoonful; black pepper, a teaspoonful: pulverize, smoke two or three pipes during the day, and force the smoke through the nose; this has proved a superior remedy. He recommends Dr. Leavit's snuff, made of blood root, gum arabic and gum myrrh, pulverized, equal parts. The Doctor was reduced very low with catarrh and this cured him.

Professor W. Paine says: Under ordinary circumstances but very little treatment is required. In cases where the catarrhal symptoms are severe, a hot bath and a large draught of warm ginger tea upon retiring, will usually relieve them. When there is extensive inflammation or congestion of the schneiderian membrane, the inhalation of the hot vapors of humulus lupulus, or polygnum punctatum, in addition to the the bath, may be serviceable. When there is febrile excitement, a little veratrum or aconite, may be given, and if the bowels be constipated, a drachm each of the fluid extracts of leptandra virginica, and prunus virginiana should be taken, sufficiently often to remove the difficulty. Any ordinary catarrh or cold can be at once arrested by taking a hot bath or spirit sweat, and the entire absence of food or drink for twenty-four hours.

Dr. Ira Warren, of Boston, was in the habit of using a solution of nitrate of silver, half a drachm of the crystals dissolved in an ounce of water, and throwing it on to the parts by the use of his shower syringes. A solution of the sulphate of zinc from three to eight grains to the ounce of water, used in the same way, also powdered nitrate of silver, used as a snuff. He says "I will add, that the nitrate of silver powder, snuffed once a day, a pinch at a time, is far more successful than any other snuff ever made."

Professor Newton says: "In the treatment of this usually simple affection, it is proper to direct our attention to the cause. If it has resulted from a suppression of the cutaneous functions, then the indication is to restore this function, and if from a suppression of secretions in the liver or alimentary mucous membrane, then our attention must be respectively addressed to them.

If the morbid affection shall commence or run into the form of coryza, angina, laryngitis, or bronchitis, the treatments will be found under these respective heads. When it makes its assault in either of these forms, it should meet with prompt attention, that such further consequences as are frequently known to ensue, may be prevented. In general, the indications are, to equalize the circulation, remove all causes of irritation, and, lastly, to restore the general tone of the system.

"To meet the first indication, a tepid bath or a vapor bath, which is preferable, aided by diaphoretic and anti-spasmodic agents, will generally be sufficient; more especially if the affection result from a suppressed secretion of the skin.

"If the bowels have been at fault, aperients or stimulating enemas will be indicated.

"The utmost attention should be given to the skin; it should be well cleansed and moderately stimulated. This may be done by friction, stimulating liniment, cayenne or mustard poultices, more particularly to the feet, and foot-baths, with the internal use of warm dilutant drinks, and, in severe cases, expectorants and emetics, and close housing for a few days."

The remedies spoken of by these authors are very effectual in the treatment of catarrh in its acute form. I have no doubt that most physicians will agree that they will relieve a slight cold. A person may take them at night, on going to bed, and on arising in the morning be free from the trouble. But, as a general thing, they will have no more effect in removing chronic catarrh, or schneiderianitis, than the waters that dash against the rock of Gibraltar have in removing that. I have tried these remedies for years, in many cases, and on myself, and I don't know that I ever cured a case of chronic catarrh. I am certain that I have never been able to cure myself. From 1844 to 1848, I tried the cold bath; got out of bed, and jumping into a bath-tub containing ice-cold water, immersing the whole body, head and all, then rubbing myself down with a coarse towel until I felt perfectly warm before I dressed. My general health improved under this treatment, but the catarrhal symptoms continued. Throughout this treatment, there was a copious discharge of mucus from the nostrils, but no headache or other disagreeable sensations. In 1849 I commenced to roam. I took with me a large sponge and a carpet bag of coarse towels. Every morning I took a sponge bath, dipping my head and face into the water first, and drawing the water up the

nostrils. This would keep my head and throat clear of mucus through the day, but it would accumulate again the next night. I continued this through the year. I then tried the treatment spoken of by Dr. Beach, and Dr. Leavitt's snuff. This snuff made the disease worse. I stopped this and tried lobelia emetics and composition tea, taking them at night, just before going to bed; and under this treatment I improved. In 1851 I tried a decoction of hydrastis canadensis, drawing it up the nostril, and gargling the throat two or three times a day. I thought that this treament did me a great deal of good, though it did not cure the disease. This I have always highly recommended to other victims of catarrh. I have used a decoction of Peruvian bark, one-half ounce to a quart of water; inject with a syringe quite warm. I think this to be a good application. For frontal headache, I have taken a towel, folded it four or eight double, dipped it in hot water, and applied it to the forehead; this will relieve the pain in the head and eyes almost immediately. I have tried and recommended to others the inhalation of steam from boiling water. This has a relaxing and soothing effect, and relieves that stuffed sensation which patients often complain of. A decoction of lobelia drawn into the nostrils while warm, will produce relaxation and relieve that swollen condition of the mucous membrane, and that dry feeling, enabling the patient to breathe through the nostrils.

In the spring of 1865 I used spirits of turpentine, five drops, in two ounces of mucilage of acacia, drawing it up the nostril, and this will clear the head and air passages of mucus very rapidly, but have no permanent effect.

I now use, and recommend to others, a solution of the sulphate of zinc, three or four grains to the ounce of water; or hydrastin, three grains to a pint of water; or hydrastis canadensis, one-half drachm in a pint of water, hot. I threw these liquids up the nostrils with a syringe; or the nasal douche bath, as manufactured by Codman & Shurtleff, of Boston. This consists of a reservoir with a tube about three feet long, with a glass nozzle; in using it you place the reservoir in a position higher than the head, and allow a small quantity of the liquid to pass through the tube in order to expel the air. Throw the head slightly forward, breathe through the mouth, and abstain from swallowing, hold the tube near the nozzle, between the thumb and finger, so that by compressing it much or little the flow of the current may be governed as desired. Press the nozzle into the nostril, and open the thumb

and finger, when the liquid will flow into and fill the nasal cavities, and in a few seconds escape from the opposite nostril. Most of persons need some little instruction on commencing the use of this apparatus.

I have used, with good results, the following prescription, obtained from Prof. Newton:

Chlorate of Potassa,	dr.	i.
Sach. Alba,	drs.	iij.
Pulv. Sanguinaria,	gr.	xxx.
Cold water,	o.	ss.

Mix; inject night and morning. I have found warm water better than cold.

A solution of sulphate of copper, from one scruple to one drachm, with half an ounce of sulphate of soda in one quart of blood warm water, is a good application. A solution of acetate of lead, one or two drachms, in a quart of warm water, has a very good effect. Alcohol and water, equal parts, has sometimes done me considerable good. I always use blood warm water instead of cold. These preparations may be thrown up the nostrils with a syringe, or the nasal bath apparatus, as made by Codman & Shurtleff.

For acute catarrh, or common colds, I use the remedies prescribed by the books. Tepid alkaline baths, steam or alcoholic vapor baths, with hot pediluvium, made more stimulating by mustard or capsicum; administer, internally, composition tea hot as can be drank; in severe cases, compound lobelia emetic, or acetated tincture of lobelia, in half teaspoonful doses every fifteen minutes, until it operates as an emetic; and confine the patient to the house for a day or two. This will relieve all the acute symptoms; but I notice that some of them have chronic catarrh months afterwards, and I have never been able to permanently relieve this trouble.

Dr. H. P. Dillenback, of Boston, made the treatment of this disease a specialty, and has written a work of some 350 pages on this and kindred diseases; but I very much doubt whether he has been able to cure one out of a hundred that has submitted to his treatment. I know a number who were made worse by it. These persons were treated with nitrate of silver, in solution, and powder, after Dr. Warren's formulæ.

I will here add that I have frequently tried internal remedies.

Beach's alterative syrup; iodine, the compound tincture, from five to ten drops, in water, two or three times a day; iodide potass., dr. ss., comp. syrup stillingia, drs. iij. Mix; dose, teaspoonful three times a day, after eating. The health of almost any patient will improve while taking these alteratives. Daily bathing in warm water, adding lye or sal-soda, has a very good effect.

In the January number of Paine's Medical Journal, 1865, I found the following: Take ten grains of muriate of ammonia and burn on a piece of tin; while burning, inhale the fumes through the nostrils. Repeat this four or five times a day. At the same time take one teaspoonful of the compound syrup of stillingia every night. This treatment has been known to cure catarrh in the head, of long standing.

ARTICLE XXII.

Psoriasis. An Essay read before the Brooklyn Academy of Eclectic Medicine. By H. S. FIRTH.

Mr. President and Gentlemen—Of the multitude of ills that have from time immemorial tortured the human family, and perplexed and disgraced the profession, none seem to resist so persistantly all known appliances, as that large class grouped together under the head of skin diseases. Some of them, it is true, are comparatively mild and manageable, but quite a large number (too large for the reputation of the profession), obstinately refuse to abandon their victims, though urgently importuned to do so, and that in many instances by those claiming to be the lights of the profession. We have concluded to select psoriasis as the subject of a few remarks; not, however, because of any amount of new ideas we expect to present, or any superior success in its treatment over and above others of our Eclectic brethren; but with the hope of provoking discussion, and gleaning from the experience of others, remedies better than any we may have to present. It is true that in the treatment of psoriasis we have had a good degree of experience, and we flatter ourselves, quite an encouraging amount of success; especially when the obstinate nature of the disease is considered. There may have been instances when we have failed to perfect a cure. Though we have no recollection of such, for it is not always possible to induce patients to be faithful in the use of the means; or to continue with us a sufficient length of time to ensure success.

Our object in presenting this paper being practical utility, and not vain display, we will not follow authors in their fanciful classification into useless varieties; such for instance as psoriasis opthalmica, psoriasis labialis, psoriasis palmaris, etc.; but consider the disease identical under whatever form it may present itself, modified by time, extent, and condition.

To mark the progress of the disease, we can usefully use names for three distinct stages, namely, psoriasis guttata, psoriasis diffusa, and psoriasis inveterata. Psoriasis guttata, or the mild form, begins by one or more red, and slightly raised spots, on the hands or other parts; these are soon covered on their summits

with little dry white scales, which are themselves, by and by, surrounded by bright circles of inflammation, over which the cuticle thickens, dries, cracks, and is partially detached. The first circle of inflammation is soon surrounded by another, this by a third, and so on until an increased surface become implicated, is stiff, hard and dry, and which untimately cracks and bleeds; thus proving both painful and unsightly. This will prove to be the case more particularly, when situated upon the hands or parts exposed to wet or cold. Psoriasis diffusa is but an extention of the before mentioned trouble, and is characterized by a higher degree of irritation, burning pain, and violent itching; which are much increased by anything which tends to raise the heat of the surface. When psoriasis has continued for many mouths or years, it acquires peculiar characteristics, which give it the title of psoriasis inveterata. Under these circumstances, those parts of the skin which are the seat of the disease are thick, hard, and unyielding, not very highly inflamed, under squamæ which are white; sometimes quite thick, and thrown off in large quantities. The crust which encases the parts affected may be compared to the rough bark of an aged oak. Psoriasis is so common a disease, and so peculiar in appearance, that it need not be mistaken for any other; and yet, as they are a few to which it bears some resembance, it may be well to point to the difference. In lepra, the patches are of considerable breadth, round, depressed in their centres, but raised in their circumference, and very regular. The patches of psoriasis are smaller, irregular in their outline, and raised in their centres.

From squamous blotches under which syphilitic poison lurks, psoriasis can be readily distinguished; for while the former are of a dark copper color, the latter is of a bright red. The squamæ of the syphilitic spots are few and flimsy, those of psoriasis thick and abundant. Syphilitic blotches divested of their squamæ are smooth and scarcely raised above the skin; psoriasis is raised, hard, and rough to the touch. We might refer to the difference between psoriasis and porrigo of the scalp; eczema, and that spurious psoriasis occuring to children, called by some psoriasis infantalis; but no necessary practical information would grow out of a further consideration of this point.

Psoriasis is not thought to be a contagious disease, but it is claimed by some to be transmitted from parents to children, (see

Green on Skin Diseases), but of this last proposition strong doubts are entertained. The cause of psoriasis is extremely obscure—too obscure, in fact, to justify speculation, as no age, locality or condition are exempt entirely from it. The prognosis, though gloomy in the extreme to our allopathic friends is, in all its varities and conditions, promising to the intelligent Eclectic. Arsenic, mercury, particularly the iodide, sulphur and the iodide of potassa, form the internal agents principally relied upon by allophathists. In speaking of the proper treatment of psoriasis, or that plan of treatment of most promising in its results, we do not deem it necessary to particularize each form or manifestation of the trouble, as we judge that with very slight modification, the same treatment will be found applicable to all. Whatever good we may expect from external remedies, and they do unquestionably materially assist, will be but partial, and not at all permanent. Our hope for a radical cure, must be placed mainly upon internal remedies, of sometimes a tonic, and always an alterative character. Let it be remembered as an indispensable matter, that remedies, both internal and external, require to be frequently changed; as the system soon accommodates itself to any one medicine; when it ceases to do good. A want of proper attention to this matter, explains the cause of many a failure.

As alteratives, I have used the following compounds, with unfailing good results; and as much depends upon properly proportioning articles, I have found, after many years of experience, that those I am about to name are as near to the mark as could be desired.

R.	Rumin,	
	Phytolacin (of each),	grs. xxx.
	Stillingin,	grs. xv.
	Potassæ Iodid.,	drs. iij.
	Syrup Sarsaparilla C,	oz. vj.
M.		

Sig., a teaspoonful three times per day; or,

R.	Irisin,	grs. xxx.
	Corydalin,	grs. xx.
	Ext. Dulcamara,	drs. i.
	Potassæ Iodid.,	drs. iij.
	Syr. Sarsaparilla C,	oz. vj.
M.		

Sig., a teaspoonful three times per day.

The following also may be used with good results:

R.	Alnuin,	grs.	xxx.
	Baptistin,		
	Menispermin (of each),	grs.	xx.
	Macrotin,	grs.	xv.
	Potas. Iodid.,	drs.	iij.
	Syr. Sarsaparilla C,	oz.	vj.
M.			

Sig., a teaspoonful three times per day.

With a good knowledge of our Eclectic materia medica, the physician will have a large collection of appropriate medicines from which to make a selection.

I very much prefer using combinations to single articles, as, when compatible, they often answer different desirable indications, and almost always increase each other's activity.

As an external adjunct, the following unguent will be found all that could be desired:

R.	Verbascum Thapsus, Fol.,		
	Solanum Dulcamara, Cort.,		
	Rumex Crispus, Rad.,		
	Sulphur Sublima (of each),	oz.	ss.
	Nicotiana Tabac.,	dr.	i.
	Adeps,		q. s.

that is a enough to cover when melted; boil an hour and strain. One application of the above will prove an efficacious remedy in scabies.. Let it be remembered that when it is desirable to use sulphur, it is infinitely more powerful and penetrating when boiled in fat or oil.

An ointment composed of hydrastin, stillingia, sanguinaria, extract dulcamara, mixed with simple salve, will prove good. In treating psoriasis much attention should be paid to the external excretory vessels, those grand outlets through which nature expels much of what is injurious or unnecessary. To that end alkaline, iodine, and sulphur baths, in alternation, will be attended with the most happy results.

Enough has been said to illustrate our ideas of the proper treatment of psoriasis, and with one or two cases, by way of illustration, we will close. Some six years ago, a German girl, of about twenty-two years, living in Twenty-seventh street, between Eighth and Ninth avenues, N. Y., applied to me for treatment. It

was a dreadful case of psoriasis inveterata. She was literally covered from head to foot with scaly eruptions, which in the morning could be collected by handsful in the bed. It is truly wonderful with what rapidity the cuticle will desquamate and reproduce itself in this disease. The case just named had existed from childhood, and had been treated by many able physicians, without any good result. In this unhappy condition she was excluded from any prospect of matrimony, and shut out from much that goes to make up human happiness. Under this grand Eclectic practice the scales disappeared, the skin regained its smooth appearance, and a new life, with cheering possibilities, opened to the once unhappy girl.

Case 2.—A photographist, of high standing, doing business in Fulton street, Brooklyn, had suffered all winter with very bad feet. His was a severe case of psoriasis diffusa. It covered both his feet, and they were so sore and swollen that he had not been able to wear shoes for months. He sought relief from many allopathists, those men who sneer at Eclecticism, but without results, save in the greenbacks that changed hands. They failed, miserably and disgracefully failed; and it remained for the Eclectic practice to restore him, which desirable result was accomplished by your humble servant in a short space of time, by virtue of those potent remedies so little known to our opponents. I might go on and detail numerous cases cured, of greater or less severity, but enough has already been said to explain all that we had intended; and if the superiority of the Eclectic system of practice, in the treatment of psoriasis, has been substantiated, your humble servant is abundantly rewarded.

ARTICLE XXIII.

Scarlatina. An Essay read before the Brooklyn Academy of Eclectic Medicine, December 4, 1867. By J. Y. Tuthill, M. D.

Having been appointed to read an essay at this meeting, it will not be my purpose to enter upon a long dissertation on any subject, but to give a brief sketch of the development, progress and treatment of a disease which has shrouded many a happy household in gloom, tearing from parent's loved embrace their dearest earthly treasures, leaving vacant seats around the family hearthstone, and aching voids in the hearts of those surviving. I allude to

Scarlatina.

This disease belongs to the genus exanthemata, and has been known by a special name for the last three centuries, prior to which time it was doubtless confounded with other eruptive diseases. But a clear and accurate discription, giving the features that distinguish it from rubeola, does not date back more than a century and a half.

Nosologists have divided this disease into *scarlatina simplex*, *scarlatina anginosa*, and *scarlatina maligna*. It must be evident to every reflecting mind that these varieties spring from a common source, are essentially the same, modified by the character of the epidemic and idiosyncrasy of the patient. When we witness the different grades of violence of prevailing diseases, we cannot doubt that they are mainly due to atmospheric peculiarities, and as a matter of course much of the variety in their manifestations is produced by constitutional conditions and the manifold complications to which they are subject; indeed, we could not suppose them to be as severe, as fatal, in persons of a vigorous vital system, as in those of an opposite character. That this is true of typhus, remitting and other fevers is generally conceded, and if these conditions exert such a controlling influence over these maladies, why may they not over the one under consideration?

The specific poison of scarlatina is doubtless produced from time to time by a train of circumstances, analogous in their tendencies; whenever the same natural forces are present, the inception of the poison by those exposed is complete, in due time giving

full proof of its power over the system by its sudden onset and rapid development.

Its type varies in different places, and in the same place at different seasons of the year, owing probably to miasmatic conditions of atmosphere. In some localities scarlet fever may present itself in a benign form for many years, then suddenly its character changes and it becomes fearfully malignant.

Scarlatina simplex, by far the mildest form of this disease, is characterized by every grade of symptoms, from mere lassitude with pharyngitis, to those which give it place under one of the other types. Its first symptoms are nausea, fever, restlessness and lassitude, attended with sore throat, chilliness and pain or uneasy feeling of the head. The symptoms, gradually intensified, are on the second day followed by an efflorescence of the skin, appearing first about the face and neck, in countless red points, which, rapidly coalescing, form large irregular patches, which in twenty-four hours give the entire integumentary system a bright scarlet appearance. After three or four days the eruption begins to be less distinct, and disappears by the seventh or eighth day, when the cuticle commences to desquamate from the face and body, often coming from the extremities in large flakes. As the disease advances the skin becomes dry, hot and unusually sensitive; the face is flushed and tumid; the tongue, red about the edges, is covered on its centre with a white coating, through which the elongated papillæ protrude; the bowels are costive and the pulse rapid; there is moderate degree of thirst; redness of conjunctiva; voice somewhat impaired; submaxillary glands tender on pressure; throat sore, in which the swelling and diffused redness of scarlatina are to be seen from the first. As the eruption progresses the febrile movements and heat of skin increase to an extent not found in any other disease, culminating in convulsions in children, and in delirium in adults. In children convulsions are frequently the first manifestations of the disease, and often are so constant and severe that they die before a positive diagnosis can be made.

After six or seven days, the pulse generally moderates and the skin becomes cooler. All the symptoms are now mitigated, and the patient has a favorable convalescence, unless he takes cold or some new pathological symptoms reveal themselves.

Scarlatina anginosa. This type is characterized by the same phenomena which attend scarlatina simplex, each assuming a more aggravated form, with greater prostration of the voluntary powers,

and increased stiffness about the neck and lower jaw. The throat suffers from increased redness and tumefaction; often white patches appear here and there, which, while thin, need cause no alarm, but demand the physician's close attention, lest it be the forerunner of a diphtheritic deposit which may invade the larynx, and jeopardize the life of the patient. Should it not reach the larynx, the throat may work off the poison, and the inflammation subside as upon the skin. Where there have been previous throat difficulties, enlarged tonsils, chronic pharyngitis, &c., the complications of the throat are apt to be of a more serious nature, often passing into a gangrenous condition.

In this form of the disease, the efflorescence does not generally cover the body as in the simple form, but occurs in scattered patches, and is sometimes so slight that no desquamation follows. When the febrile symptoms abate within four or five days, membraneous exudations seldom form upon the tonsils and fauces; but if the fever continues with its usual force, false membrane often forms in small patches, which, if possible, should be removed by gargles. Sometimes this cannot be effected, and then they soon appear darker, the breath becomes fetid, the glands of the neck indurated, and often go on to suppuration. The case now assumes a most gloomy aspect. The patient is troubled with tenesmus or diarrhœa and griping pains of the abdomen, which are soon followed by collapse and death. Many die in a comatose state from cerebral troubles; while others succumb from affections of the abdominal and respiratory organs; yet while internal organs may suffer, I should not cease to hope for a favorable termination of the case, but devote myself assiduously to it, trusting thereby to alleviate and overcome the symptoms, and see my patient finally convalescing.

Scarlatina maligna. When it assumes the malignant type, the force of the disease is centered upon the throat, and seems to be complicated with typhus-like symptoms, which, together with the specific poison of scarlatina, depress the system to such an extent that it is difficult to bring about that reaction so indispensible to a successful issue. When this occurs, the eruption, if it appears at all, is never fully thrown to the surface, is livid and incomplete, fading and disappearing early, often reappearing, interspersed with petechiæ; the skin becomes cold and pulse feeble, attended with extreme prostration.

When this stage is fully inaugurated, the typhus symptoms

continue with the peculiar enteritic and cerebral concomitants, and the patient either succumbs, or has a tardy or imperfect convalescence.

In *this* form of the disease medicine has but little effect. The throat becomes foul and sloughy; the tongue dry, brown and tremulous; the teeth are covered with sordes; the breath is offensive; an acrid fluid is discharged from the nostrils, and the glands of the jaw and neck are greatly swollen; there is also purging and vomiting more or less intense, and convulsions and coma often follow, resulting in death.

Thus I have endeavored to give some of the most important symptoms that characterize this malady; yet every case has its peculiar characteristics.

Scarlatina prevails at all seasons of the year, but a close, muggy atmosphere of autumn, winter and early spring, with low, wet lands, seem most congenial to the dissemination of this disease. The period usually required for incubation is from four to eight days, but it frequently appears sooner, and sometimes is not manifest until a much later period; this depends very much on the impressibility and age of the individual, and in no case would it be wise to pronounce an exposure abortive until after the second week. As to the time when an exposure is most likely to prove effectual, authorities differ, some claiming that it cannot be contracted before the eruption has made its appearance, while others contend that the forming stage, the twenty-four hours preceding the dermoid and pathognomonic symptoms, is the time most favorable for its communication. From my own experience, I am led to look upon either stage as competent to its propagation, but think one but slightly predisposed, would be more certain to become its victim after the eruption has appeared upon the surface.

No age is impregnable to this malady, yet it is emphatically a disease of childhood, probably because childhood is more susceptible to its assaults than other periods of life. When it attacks an adult, all its symptoms are intensified, and its various complications more apt to occur; hence it is always considered more perilous, and if the patient survives the immediate struggle, sequelæ of no desirable character often follow, leaving its victim impaired for life.

Scarlatina is classed with those diseases which attack the system but once, and as a general rule this is true, yet instances are on record where the same individuals have had the disease a second

and third time. These anomalies are very rare, and when a person has once had genuine scarlatina he is ever after thought to be proof against it.

Treatment.

If the disease is of a mild form it requires but little more than the regulation of the bowels and mild diet. If the bowels be costive a mild cathartic should be given; the patient, being kept in bed, should have cooling, ascidulous drinks, with some mild diaphoretic, by which means a gentle determination to the surface will be maintained. When the skin is very hot and dry, ablutions of warm water, followed by inunction of the surface with cold cream, sweet oil or lard, is of great advantage, blunting the subcutaneous nerves, and allaying the irritability and uneasy feeling about the skin, and is followed by quietude and refreshing sleep. If the patient is much debilitated, his strength must be supported by stimulants, beef tea, etc.; indeed, the rules of treatment in continued fever hold good here.

The diet should be of a kind that gives the digestive powers but little to do, such as beef-essence, wine-whey, chicken-broth, etc. When the angina is such as to cause much pain in deglutition, I always give beef tea, jelly, etc., iced, which is very comforting and grateful to the patient; and in the diet I give three or four grains of chlorate potassa every three or four hours, to a child six or seven years of age.

Fomentations and poultices, frequently changed, are useful applied to the throat. As a gargle, I use a decoction of the berries of the rhus glabrum and leaves of the hamamelis virginica, sweetened with loaf sugar, with chlorate potassa, dr. j., dissolved in half a pint of the decoction. If the throat becomes very offensive alternate the above gargle with one of the following:

	R.	Creosote,	gtt. viij.
		Aquæ Puræ,	oz. ij.
	M.		
Or,			
	R.	Liq. Sodæ Chlorinatæ,	dr. iij.
		Aquæ Puræ,	oz. ij.
	M.		

In malignant cases, stimulants, light and nutritious diet, are to be relied on, with such other means as symptons may indicate.

The disease often spends itself with great force upon the kidneys, and from its first onset there is a constant tendency to con-

gestion and desquamation of these organs; hence the necessity of frequently examining the urine for albumen, so that by use of proper means the kidneys may be left in a healthy condition.

Tonics should always be given during convalescence. The following I have often used:

R.	Tr. Ferri Mur.,	oz. ss.
	Tr. Cinch., C.,	oz. iss.
	Syrup Simplicis,	oz. ij.
M.		

For a child six or seven years old give a teaspoonful three or four times a day, in a little water. With this I think my patients are less liable to have faulty assimulation, running at the ears, glandular enlargements, or any of the developments of scrofula.

The patient should be well shielded from cold, and carefully cared for, for six or eight weeks after convalescence; because by exposure, ascites, edema of the glottis, or general anasarca may come on in a night, a full month after.

The sequelæ of scarlatina are numerous, and when they arise must be treated accordingly.

Belladonna has been much used as a preventive of this disease, but as such I have no faith in it; but do use it during the eruptive period of the disease in alternation with aconite. These, with camphorated oil, applied to the throat, with or without a gargle, are sufficient for the treatment of many cases.

ARTICLE XXIII.

Annual Report of the Secretary of the Eclectic Medical Society of the City of New York, presented at the Annual Meeting, Nov. 20, 1867.

Mr. President and Gentlemen of the Society: Two years ago last week, Nov. 14, 1865, this Society was formed, at the residence of our late and lamented president, Dr. H. M. Sweet, and we have thought it might prove interesting to report, at this, our second anniversary, some facts with reference to our history and progress as a society.

In the first year of its existence, the following were the professional subjects discussed, and the essays presented, at the several meetings, so far as they appear upon the records, viz.:

Jan. 20, 1866.—Discussion: Asiatic Cholera.

April 18.—Essay: The Physiological Condition of the Blood; by Dr. E. Whitney.

June 20.—Discussion: A College, Hospital and Dispensary, and their Importance in advancing the Interests of the Profession.

July 18.—Essay: The use of Sarracenia Purpurea in Variola; by Dr. A. B. Whitney.

Sept. 12.—Essay: The Nursery at Randall's Island, and the Innoculation of Small Pox; by Dr A. B. Whitney.

Oct. 10.—Discussion: The Eclectic Organization in New York city, its Progress and its Importance in correcting some of the Poli ical and Professional Errors of the Day.

We have thus, in the first year, a record of only eight meetings held; three essays presented, and three discussions on professional subjects, in addition to those directly elicited by the three essays. We judge from the records, that the discussions were of much interest, as well as the essays, but our limits will not permit us to give any synopsis of the views of the various speakers, or even to give a list of those who took part in the discussions.

At the close of the first year, the Society numbered eleven members.

During the second year, just now closed, sixteen members have been added; in other words, three-fifths of all who have ever joined the Society, have united with us during the past year; and four new members are proposed for election this evening. Should

the Society increase as much in the year upon which we now enter, our organization will number more than forty members at our next anniversary.

During the past year, the following were the professional subjects discussed, and the essays presented:

Nov. 21, 1866.—ESSAY: The Medical Statistics of New York City.

Dec. 19.—ESSAY: Occlusion of the Vagina, and Report of an Operation for its Removal; by Dr. A. B. Whitney.

ESSAY: Tubercle; its Formation, its manner of Deposit in the Lungs and elsewhere, and its Hygienic and Therapeutical Treatment; by Prof. Edwin Freeman.

DISCUSSION: The Therapeutic Action of Calomel.

DISCUSSION: On the Endowment of Medical Colleges and Hospitals.

Dec. 26.—DISCUSSION: Medical Education.

Jan. 16, 1867.—ESSAY: Inversion of the Uterus.

DISCUSSION: The Treatment of Asthma.

Feb. 20.—ESSAY: The Preparation of Concentrated Tinctures, or Saturates; by Dr. Wm. R. Hayden.

ESSAY: Report of a Case of Poisoning by Arsenic, and its successful Treatment; by Prof. Paul W. Allen.

ESSAY: Operation for a Peculiar Case of Strangulated Hernia; by Prof. Edwin Freeman.

March 20.—DISCUSSION: The Treatment of Arsenical Poisoning.

Report of Case—Syphilitic Inoculation; by Dr. A. B. Whitney.

April 17.—LECTURE: The Chemical Tests of Arsenical Poisoning; by Prof. J. Milton Sanders.

May 15.—ESSAY: Puerperal Convulsions; by Dr. A. B. Whitney.

Report of Case—Partial Paralysis, and its Successful Treatment by Electricity; by Dr. E. H. Millington.

June 19.—DISCUSSION: The Treatment of Puerperal Convulsions.

July 18.—Report of Case—Extensive Necrosis of the Lower Jaw, from the use of an Amalgam Tooth-Filling, and its Successful Treatment; by Prof. Paul W. Allen.

Report of Case—Non-Union of the Humerus after Fracture, of two years duration; by Prof. Allen.

ESSAY: Veratrum Viride; by Prof. Robert S. Newton.

Sept. 18.—DISCUSSION: The Proposed Board of Medical Examiners of the State of New York.

Report of Case—Fistula in Ano and its Treatment; by Dr. A. B. Whitney.

Report of Case—Ulceration within the Os Uteri, in the second month of Pregnancy, and its Successful Treatment with the Chloride of Zinc.

Essay: The Curability of Cancer; by Prof. R. S. Newton.

Oct. 16.—Essay: Vegetable Medicinal Preparations; some of the Causes of their Non-reliability, and Lack of Uniformity in Strength; by Prof. Chas. T. Hart.

Essay: Cerebro-Spinal Meningitis; its History, Pathology, and Treatment; by Dr. J. M. Comins.

From this statement, it will appear that within the past year, twelve meetings have been held; twelve essays presented, one lecture given, eight reports in detail of important cases, with their treatment, besides several discussions on medical subjects, in addition to those elicited by the essays, the lecture, and the cases reported.

Our medical brethren from the Brooklyn Society have contributed much to the interest and value of our meetings, and every meeting has been of much usefulness to every medical-man present. The discussions on every topic presented have been freely engaged in, with fraternal courtesy; and not a few original suggestions have been presented on important points of medical and surgical practice.

The students in the Eclectic Medical College of the city of New York have ever been cordially invited to attend the meetings of the Society, as well as the members of the Brooklyn society. Several of these students, some of whom were graduates of other medical schools, and had been for years engaged in medical practice before matriculating here, have expressed their gratitude for valuable information which they have received from the essays, reports, discussions, and rare methods of treatment here presented. It is safe to say that at least eight times as much matter of a professional character has been presented, during the past year, as during the year before. PAUL W. ALLEN, *Secretary.*

ARTICLE XXIV.

Occlusion of the Vagina, and Report of an Operation for its Removal. An Essay presented by Dr. A. B. WHITNEY, before the Eclectic Medical Society of the City of New York, Dec. 19, 1866.

The patient, a young married lady aged twenty-seven, recently applied to us, desiring to know if there were any means of overcoming a natural deformity, the existence of which was brought to her knowledge after her marriage, some years since. Said she had several times consulted her physician in Albany, who had carefully examined the case, and reported the result as a very remarkable instance of deformity—the occlusion of the vagina; remarking that the orifice was nearly closed, and that nothing could be done to relieve a case of such firm and extensive adhesion.

Being requested to examine and ascertain the fact, we at once discovered that the external parts were well formed and fully developed. The vaginal orifice, a few lines within the labiæ-minoræ, was nearly closed. The fascia were perfectly united for some sixteen or eighteen lines at the posterior or base, and at the anterior or apex, only a few lines—the union being very firm and unyielding. The examination was attended with great difficulty, causing severe pain, convulsions and syncope. As far as could be ascertained, this union extended backward some distance and formed very near a triangle, whose base may be considered the posterior of the vaginal orifice, parallel to the rectum; and whose sides terminated just below and behind the meatus urinarius. The plane of this triangle was quite remarkable, and appeared as if formed at some period of life by cicatrization. It consisted of a firm, compact and hard seam, effectually uniting the walls of the orifice, and presenting an obstruction differing materially from any form of hymen described in the books, and quite too formidable to be removed without a surgical operation. On examination *per rectum*, the *os uteri* was found in its normal position. From the information thus obtained, the opinion was given that the occlusion could be obviated, and the normal condition of the parts restored, by dividing the plane of the triangle so completely as to remove all constriction at its base.

The patient being exceedingly anxious to have the error

corrected and health restored, made arrangements at once for the operation. This was successfully performed, while the patient was under the inflence of chloroform, and consisted in a vertical incision dividing the triangular plane in its median line immediately backwards and downwards, entirely through its base, to the perineum. The extent of adhesion was much greater than anticipated; still the incision was carried as far as necessary to remove all constriction and leave the passage entirely unobstructed. This operation was exceedingly delicate and required great care and exactness, to divide correctly a plane of considerable extent so as to leave upon either wall the part belonging thereto, and thus restoring their precise normal condition, which the result showed to have been fully and perfectly accomplished.

The subsequent treatment consisted in the use of pledgets of oiled lint, so adjusted and confined as to prevent the surfaces of the wound from touching and uniting in the process of healing. Though this operation was performed but recently, in the hottest part of summer, the wound healed kindly and perfectly, so that in about two weeks after the operation, the lady was enabled to return in good health and fine spirits to her residence at the capital of the Empire State. When we consider how great an occasion for disappointment was removed, and what amount of happiness was secured by this delicate operation, it cannot be regarded as an unimportant one.

ARTICLE XXV.

Tubercle: Its Formation, its Manner of Deposit in the Lungs and elsewhere, and its Hygienic and Therapeutical Treatment. By EDWIN FREEMAN, M. D., Professor of Anatomy in the Eclectic Medical College of the City of New York. Read before the Eclectic Medical Society of the City of New York, Dec. 19th, 1866.

Mr. President and Gentlemen: In order to bring up the subject of tubercular consumption, and elicit from you its best treatment, I present this paper on the general subject of tubercle. In a climate such as this, where all pulmonary diseases, and especially pulmonary consumption, are so prevalent, it behooves us to look carefully into the nature and causes of this latter disease, and the indications both for hygienic and therapeutical treatment.

Tubercle belongs to the class of cacoplastic or aplastic deposits, and, I hold, owes its origin to a degraded condition of the nutritive material, from which old textures are renewed and new ones formed; and differs from fibrine or coagualable lymph, not in kind, but in degree of vitality and capacity of organization. This is owing principally to a defect of the red corpuscles of the blood, and an excess of fibrine, which are the chief features of the scrofulous diathesis or tuberculous cachexia. Fibrine is the element of the blood from which the areola and connective tissues are formed, and depends for its perfect development, on a normal proportion of the red corpuscles, the true vital element of that plasma. Among the causes of this depreciation of the vital element of the blood, are insufficient food, want of pure dry air, of warmth and of light, long continued mental depression, aggravated and prolonged disease of the digestive organs, insufficient excretion, and the injurious influences of fevers and other serious diseases. Excessive evacuations of blood, or the more animalized secretions, and severe courses of mercury lead to it, by reducing the quality of the plasma. Other causes might be enumerated, which, like those, operating for some time, would break down the strongest organizations, and sow in them the seeds of this devastating disease, which would ultimately lead to their death. Another cause for this deteriorated vitality, is the feeble organizing power impressed upon the germ of the human organism, and thus transmitted by the parents. This is not the result of any effort of the will, neither can it be corrected by any such effort. It is a result of ignorance

almost amounting to recklessness, concerning the laws that should govern the procreation of the species. It is universally admitted that as a penalty for the marriage of too near blood relations, this deterioration results with all its consequent developments of a scrofulous diathesis, such as blindness or deafness, tubercle in its various forms, idiocy, scrofulous eruptions, &c.

There is also another law concerning the intermarriage of persons of similar temperaments, especially if those temperaments be of the non-vital or adjunctive class. The late Prof. Byrd Powell, has taught that the result of such an union, will be either an organization non-vital at birth, or, if alive, not capable of sustaining vitality to years of puberty; or if the contrary, then dying speedily from development and rapid disintegration of tuberculous deposits. That this is a great truth, underlying a vast complication of ills to which we are subject, I have no manner of doubt. In the union of temperaments of this kind, both the parents have feeble organizations, and the resulting germ cannot be expected to have more than that. Thus we see, how that a constitution naturally strong may be so reduced that the material for nutrition in the plasma of the blood may have its organizing power materially decreased, and we have seen how that power may be weak from the first conception of the organism, giving rise to all the well known symptoms of the scrofulous and tuberculous diathesis. It is thus possible to conceive how tuberculous consumption can exist, without a direct hereditary transmission of the disease from the parents, even when the parents and ancestors have been known to be entirely well and free from any taint of that disease. This low state of organizability does not belong to the whole mass of the fibrine of the blood, else tubercle would be developed in the tissues everywhere, but to a small or large portion, according to the ratio of disproportion between the red globules and the fibrine. It escapes from the blood in the ordinary processes of nutrition of the tissues, and a modification of it forms the crusts and scabs of scrofulous eruptions, instead of usual cells of the rete mucosum and epidermis; or as a granular interstitial substance evidently tuberculous; or from the aggregation of particles forming the tuberculous masses so common in tubercular diseases. These conditions of the effused material occur as a consequence of retrograde metamorphosis, instead of progressive, from want of vital assimilating power. Where there is a great abundance of this fibrinous element, there is an increased tendency to deposit, which is greatly

promoted by all varieties of hyperæmia, and prevails most in organs that receive the largest supply of blood. This explains the peculiarly pernicious influence of inflammation of internal organs, especially of the lungs, in scrofulous subjects. There are several circumstances which contribute to render the lungs especially liable to tubercular deposit: 1st, their great vascularity and the great amount of blood that flows through them; 2d, their being the chief seat of the formation of fibrine; 3d, the softness and yielding nature of their textures, which permits effusion to take place more readily than in denser textures; 4th, their exposure to external causes of disease, whether it be cold, irritating substances entering by the air tubes, or causes operating through the circulation. In hot climates, cacoplastic deposits occur in the liver and other abdominal viscera more frequently than in the lungs and chronic liver disease and dysentery are the results, in such persons as would in a colder climate fall victims to consumption. The lungs and bronchial glands are by far the most common seat of tubercles, and when found elsewhere, they are commonly more abundant there, and in a more advanced stage. In 100 young subjects, Lombard found bronchial glands affected in 87; lungs in 73; mesenteric glands in 19, and spleen in 25. In 100 adults, the lungs not included, he found the intestines affected in 26; mesenteric glands in 19; bronchial glands in 9, and spleen 6. The relative frequency of tuberculization of bronchial glands in child and adult is 87 to 9, or 9¾ times greater in the former. Of 312 tuberculous children, Rilliet and Barthez found the lungs free from tubercles in one-sixth only. They found tubercular matter in children more frequntly in the lungs than in any other organ; next the bronchial glands; afterwards, but at some distance, the mesenteric glands and small intestines; then the pleura, spleen, peritoneum, liver, large intestines, meninges of the brain, kidneys, heart, stomach and pericardium.

Tuberculous matter is effused upon the surface of membranes, as the mucous membrane of the bronchial tubes and intestines, or serous membranes, as the meninges of the brain, peritoneum, pleura, &c., as the result of chronic inflammation, or even of acute, and is usually the granular, miliary, gray, or drab-colored tubercle. This is the highest form of tubercle, next in order to the lower forms of organized deposit. Under the microscope, according to Dr. Williams, there is noticed a predominance of minute and often irregular granules, and a comparative absence

of fibres and cells, of which mere traces are seen at least in the older specimens. The granules are aggregated together by an amorphous material, the solidity of which gives hardness and some translucency to the mass. The chemical nature of granular tubercle is albuminous, with some gelatin and a little fat; the latter in very minute proportion, and occupying the center of some of the granules; the gelatin being the amorphous cement just noticed. After a greater or less time, those tubercles lose their semi-transparency, and become of an opaque or dead-pale yellow hue, like the color of raw potato or parsnip. This is the transformation to the crude yellow tubercle, first described by Lænnec. It is the result of a further degeneration or degradation of the deposit, and may be promoted by a deficent supply of plasma, or by an undue flow or accumulation of blood in the neighborhood, as by congestion or inflammation, increasing the warmth, and exalting the chemical affinities in a material that has not the vital power of resistance, by which the living tissues maintain their integrity. But tubercle is frequently deposited at first in this yellow opaque state, which circumstance is a mark of a still more degraded condition of the nutritive function; and the more extensive forms of tubercular disease most frequently abound in this form of deposit. In this there is a rapid tendency to change into the lower forms of aplastic material, to that of maturation, and softening into a cheesy substance, and at at last, into an amorphous and granular mass, which becomes disintegrated by the chemical action of the adjoining fluids.

Rokitansky thus describes the softening of tubercle: "After the tubercle has existed for some time in a state of crudity, it becomes, as it were, loosened in its textures, and usually increases in volume; it breaks up on slight pressure, and become more moist; then changes into a yellowish dissolving, casein-like, fatty and viscid matter, and finally breaks up into a thin whey-like acid fluid, in which flocks and shreds, the remains of the imperfectly disintegrated tuberele, are observed swimming. This is tubercular pus."

Where tuberculous matter is deposited upon the surface of membranes, it is generally in an uniform layer, appearing often like a false membrane. When in the textures, the granules accumulate into small masses, by accretion, attracting the tubercular substance, as fat attracts fat, or bone the substance of bone, until they grow into the size of millet seed, or cherry stones, or

even larger. In the lungs it is deposited upon the inner surface of the air vesicles and the smaller bronchial tubes leading into them, filling them up; and clusters of those cells and tubes thus filled up and pressing against each other, form masses varying in size up to that of a pigeon's egg, distributed throughout the lung, and generally deposited first, and most numerous, in the apex of the lungs. It may also be deposited, at the same time, in the interstitial tissue, the whole forming what is called tubercular infiltration of the lung, and may involve large masses of that viscus.

The pressure upon the walls of the cells and tubes may cause ulceration of them, and the pus penetrating the tubercular mass, hasten the process of disintegration, and vomicæ or abscesses may thus be rapidly formed. Depositions of the firmer kinds of tubercle may remain some time without giving evidences of their presence, or at least without creating much disturbance; but when they change, and the disintegrating particles become liquefied and thrown off in copious expectoration from the lungs, or in diarrhœa, from the bowels, the person experiences rapid changes, becomes exhausted, hectic, and soon dies. When the substance effused is the yellow form of tubercle, he is soon wasted away with rapid consumption or exhausting diarrhœa, for that form of tubercle is low in the grade of cacoplastic deposits, and is associated with a weak resisting power in the constitution. The expectoration and diarrhœa are often associated with local inflammation, developed around the seat of the deposit, and care must be taken that in combating that inflammation, we do not weaken an already greatly enfeebled vitality of the system.

Diarrhœa occurs as a result of the softening of tuberculous matter effused into and upon the mucous membrane of the intestinal canal, or, as is often the case in children, from tubercular deposit into the mesenteric glands, as in tabes mesenterica, which, compressing the delicate lacteal vessels passing through them, prevent a portion of the nutrient elements of the food from passing onwards to the blood; in which case it is thrown off with the fecal matter. When it is deposited in other glands it obstructs their functions by pressing upon their blood vessels and excretory ducts, preventing the proper functional action of those glands. When deposited in the meninges of the brain they produce an inflammation of those delicate structures, with, perhaps, a dropsi-

cal effusion into the cavity of the arachnoid, or into the ventricles of the brain.

Without inquiring into the symptoms of this formidable disease, I will merely speak of some of the indications for the treatment of it, as seem to be presented by the nature of the complaint. In scrofulous persons the skin is usually thin, delicate and very impressible; and that is, probably, one reason why tubercular consumption is more frequent in cold, damp regions where the climate is very changeable, as in the north temperate zone near the sea coast. The skin is often chilled and made pallid, or shriveled, and, in consequence, the secretions are retained in the blood and thrown upon the lungs, causing bronchial or pneumonic inflammation. Medicines should be administered of an alterative character, having also diaphoretic properties; so that while we try to change the character of the blood plasma, we cause the imperfectly formed material to seek an exit upon the cutaneous surface. For this there is nothing better than a combination of our vegetable alteratives, as compound syrup of stillingia, &c. It will not always do it at your bidding. Yet, it is true in scrofula, that when the material is thrown off upon the surface in sores, it is withdrawn from the vital structures within, unless there be an excessive amount of such material. By establishing sores upon the surface, artificially, we might weaken the vital organizing power, and these would be an increased renewal of the offending substance in the blood. It is a blood disease and must be acted upon through the blood. The vital element of that fluid (the red corpuscles) must be increased, and their vitality exalted; at the same time agents introduced into the circulation that may dissolve those aplastic and cacoplastic substances, thus putting them into a condition in which they may be eliminated from the system. The excretory organs should be got to work in as healthy a manner as possible to further those ends, and the skin kept clean and sufficiently warm, by an abundance of warm clothing. Alkalies and the fixed oils, have a solvent tendency on such deposits. Such alkalies only should be given, which, while they would produce that effect when they came in contact with the deposits, would exert no injurious influence on other structures. If they can be so combined as to affect favorably the corpuscular element of the blood, they are so much the more valuable. The hypophosphites of lime and soda, either alone or combined with iron, do this, and phosphorus is a very important element of the red blood corpuscles.

The fat may be supplied by such doses as the patient can bear of the refined oil of the liver of the cod, or spermaceti or seal oil. Fat is very minutely divisible; and as, in the preparation of material for nutrition of the system, fat becomes the basis of all cell growth, it thus will nourish and support the strength of the body. Besides that, its extreme divisibility allows it to penetrate into the substance of those firm tubercular masses, loosening them up, and making them susceptible to be acted upon by the surrounding healthy structures. Fat, in the form of the phosphorized fats, is also an important element in the red blood corpuscles. Local irritations should be subdued by small doses of veratrum viride, combined with a relaxant and expectorant, such as lobelia. If there be ulceration of the mucous surface of the bronchial tubes, some of the balsams are useful. Nervous irritability may be suppressed by opiates or hyosciamus, or lupulin. The vitality must not be reduced by tampering with mercurials or antimony. If an expectorant be needed, lobelia and squills, with sanguinaria, glycerine and hyosciamus are very valuable. Favorable conditions of climate will evidently facilitate recovery in the early stage; that which is equally mild and dry being preferable, so as to allow free cutaneous action and prevent bronchial irritation. The iodide of potassium is a valuable agent in small doses, with alterative and alkaline properties. Moderate use of bourbon whiskey affords a pure stimulant, accelerating the vital force, and is a valuable adjunct with other remedies.

The patient should, under all circumstances, take the air as much as possible, unless he becomes too feeble to exercise, and should, as much as possible, expand his chest, to receive as much air into the lungs as he can, and, by closing his lips all but a small opening, he should pass it out slowly, that it may remain in contact with the blood longer than it otherwise would, for its more thorough decarbonization and higher oxygenation. An instrument has been invented by Dr. Ramadge, of England, called the respirator—a small tube, funnel-shaped at each end—one of which is larger than the other, for the purpose of assisting the patient in slow inspiration and expiration, which is admirably adapted to the purpose, and which enables him to increase his breathing capacity to a very remarkable degree. Thus the blood is rendered purer and more highly vitalized, and the pressure of the inspired air, slowly expired, forces open the air tubes which are being pressed together by the deposits, and crowding upon those deposits,

causes their absorption; and, also, by pressing together the walls of any newly formed cavities in early consumption, causes their adhesion. This result is certainly very desirable, since abscesses and tubercular masses tend to encroach upon the healthier parts of the lung, if the lung cannot be made to act upon them.

This inspiration and expiration of air must be accomplished by the whole chest, but mainly by the action of the diaphragm and the abdominal muscles. A two-fold purpose is accomplished by this, viz.: that above mentioned, and a new impetus is given to the process of digestion and all the excretory functions; and, also, the patient soon begins to feel the increasing capacity of the chest; the shoulders no longer droop, he stands erect, and the load of disease becomes soon lightened on him. The inhalation of oxygen gas is useful in the earlier stages of consumption, for the purpose of more highly oxygenizing the blood and accomplishing the same results. Inhalation of vaporized and atomized medicated fluids to subdue bronchial irritation, and by their absorption to act on the aplastic material of the blood, sometimes accomplishes very satisfactory results. The frequent application of mustard or stimulating liniments to the chest is useful to relieve wandering pains or local congestions, and capillary and bronchial irritation. In patients of delicate organizations, with evident taint of scrofula, or where there is a suspicion of a tuberculous cachexia, early attention should be given to the early, faintest indications of the setting in of the disease, and a course of treatment, hygienic and medical, adopted, which may and will, in a very large proportion of cases, change the inclination to disease, and save the life. If this be not done, and the disease be allowed to progress until firmly seated, the most persistent and loving care, and the most skillful medical attention may not be able to cut short its ravages until the life is sacrificed.

ARTICLE XXVI.

Saturates or Concentrated Tinctures. An Essay read by W. R. HAYDEN, M. D., before the Eclectic Medical Society of the City of New York, February 20th, 1867.

Mr. President and Gentlemen of the Society: At the last meeting of this Society, our worthy vice-president and no less worthy and industrious secretary put their two heads together and determined that I should not be a drone in this hive, and to prevent it, proposed that I should prepare a paper to be read this evening, and in doing so, they either forgot, or did not deign to inform me upon what subject I should write, and though an Eclectic I did not know what to choose. So, however painful the infliction prove to you, upon their devoted heads let your censure fall, not upon mine.

I confess my first impulse was to decline the honor which they had conferred, for I am not over fond of work, nor very ambitious withal. My second impression was, that I had no right to set a bad example, or shirk my part in the labors of the Society. So I pondered for a subject, and the first theme that presented itself to my mind, was *Oleum Morrhua;* not that it was a hobby or favorite remedy of mine, nor again for any good that I thought it had ever done for mankind. Quite the contrary, but simply because I wanted to rid the Pharmacopœia of some foul, nauseous thing, and I knew of none more repulsive than cod liver oil.

Then caution came and whispered in my ear: "Be careful sir; that fish has many friends, and though you intend no disrespect to them, they may, nevertheless, feel sensitive at the severity of your strictures."

Disappointed, I turned my thoughts from the ridiculous to the sublime, and thus soliloquized—this age is altogether too material, it has no appreciation of those little influences which heal both body and soul. Warming with the fire which began to kindle within me, I worked my brain into a fine frenzy, and said to myself, I will write a paper on imponderables, and astonish their feeble intellects with the grandeur of my discoveries, and giving wings to my fancy, I soared away into the misty realm of the invisible, and my vision was opened to a new class of remedies, which neither grew on shrub, bush or tree, nor were they found

in the bowels of the earth, or at the bottom of the sea. I saw what before the eye of man hath not seen, nor his hand felt.

They were *essential essences—vital forces*—the very elements of life. The atmosphere was filled with *potencies* and *dynamics*, and I saw how the world might be healed by a *touch*, a mere breath, and when I had beheld all, and much more than I have related, I began to feel exceedingly *good*, and as I rose higher and higher on those metaphysical clouds, I began to pant for fame, and just as I was in the act of stretching forth my hand to carve my name on those everlasting towers erected to the gods, a good genius from the earth sphere (and he is with me to-night), laid his hand gently on my shoulder and brought me back to *terra firma* again. "Sir," said I, somewhat sharply; feeling annoyed at the liberty he had taken with me. "Sir," echoed he blandly and then in the beautiful and expressive language of the age, said: "Dry up! It is none of your metaphysical nonsense, none of your fine-spun theories, that the gentlemen of this Society want; for they have enough of that *stuff* already, and if they had not, they have the ability to make their own without your aid; so do not presume that so intelligent a body of men as compose the the New York Eclectic Medical Society, are not posted in all that is worth knowing in that direction, and if you will only take it kindly, I will tell you what they do want; and it is simply this. They want to know what has been your practical experience in the employment of certain medicines and the best methods of preparing concentrated vegetable fluid remedies, for they are practical, benevolent men, and would give more for a single grain of a curative, than for a pound of theories."

Upon this valuable hint I acted, and have brought you some sample preparations for inspection, and if you will only have a little patience with me, I will tell you how they were made, and say a few words about the

Vacuo Process,

and some other matters which are pertinent to the subject selected for this paper.

We are told by those who profess to know, that vegetable medicines prepared in vacuo are far superior to those made in any other way, for the following reasons:

First. The article submitted, being entirely excluded from the atmosphere, does not oxidize.

Second. That being boiled at a much lower temperature in alcohol than in water, they are not decomposed by excessive heat and the volatile or essential principle is not impaired or lost.

Third. That there is a most decided saving in material, quality and expense.

Of the merits of those claims I should be pleased to hear the opinion of the able Professor of Chemistry in this college. In the absence of any such authoritative expression, I shall take the liberty to deny full one-half of those claims, as having no foundation in fact.

Briefly then: a very material change does take place in the active principle of the material submited to the *vacuo process.*

Second. The aromal or ethereal property which pertains to most plants is decomposed, changed and loses, to a greater or less degree, its original identity and action. Having said thus much, I shall leave those points for after discussion.

There are at the present time, I believe, but two principal manufacturers of those preparations technically known as *fluid extracts,* in this country or Europe—Henry Thayer & Co., Cambridgeport, Massachusetts, and Tilden & Co., New Lebanon, New York. Having used the various preparations of both parties to a considerable extent when they were first introduced to the profession, I speak from experience in their employment. Of the two manufacturers, I think those of Dr. Thayer decidedly the best, and both of them much inferior to the old officinal tinctures of the Dispensatory, which when properly made from good materials, are, in my humble judgment, much preferable to any other fluid medicines. I presume the most, if not all of you, are familiar with the formula and method of making the officinal tinctures; nevertheless I will give you a sample formula on the blackboard.

R.	Rumex Crispus,	oz. iv.
	Spirits Rectificatus (76 per cent),	oz. xxiv.
	Aqua pura,	oz. viii.
M.		

Saturate for fourteen days; express and filter through paper.

In regard to the strength of the menstruum employed, Professor J. King, author of the "American Eclectic Dispensatory," says: "As the virtue exists principally in the resin and oil, there is no necessity for the addition of any water to the preparation, and I have obtained much better results from the tincture with strong alcohol, as I prepare it, than from the diluted tincture."

The officinal fluid extract, is made as follows:

℞.	Stillingiæ Rad,	oz. xvi.
	Spirits Rectificatus (95 per cent),	oz. iv.
	Aqua pura,	oz. xii.
M.		

Saturate for twenty-four hours, then decant and set aside. This completed, place the residue in the *vacuo* cylinder, adding more alcohol and water, and extracting the remaining strength at two hundred and sixty-nine Fahrenheit. The time necessary to obtain the whole strength of the material submitted, depends much on the nature, fibre, and constituents of the articles employed, and also upon the length of time which they have been in saturation. Although it is necessary, in order to make a good mixture of uniform strength, that the menstruum should be of the same percentage of alcohol in all cases, yet, if we have only in view the best means to extract the virtues of a plant, we shall find that where twenty per cent is quite sufficient to extract all the medicinal virtues of the *nepeta cataria*, ninety per cent will be far better for the *rumex crispus*, on account of the large amount of resin which it contains, and the same will hold good in regard to the *podophyllum peltatum*, *leptandra virginica*, *iris versicolor* and a large number of other plants. The great majority of our vegetable extracts, are anything but uniform and reliable in their quality and manufacture. This arises from the following, among other causes.

First. They are not collected at the right season of the year.

Second. They are not properly cured.

Third. There is a great difference in the strength and quality of the article owing to the difference or varieties of soil and climate where they are produced. A fine illustration of this fact will be found in the difference between the Connecticut and western scull-cap, the latter being much stronger and superior to the former.

Fourth. The employment of articles which have become inert or worthless, through age or other causes.

Fifth. Chemical changes which have been induced by the action of heat, light and atmosphere.

And lastly, the want of proper knowledge in their selection, manipulation and manufacture.

To prove one of my last assertions, I will mention that some three weeks since, I obtained a pound of the *iris versicolor* from

Mr. Peck, in John street, and it only yielded about forty per cent as much irisin as another sample obtained from Coolidge & Adams. This was owing to no fault of the dealer, perhaps, except that he should have marked and sold it for an inferior article, if he knew it to be such, and I can hardly comprehend how he could help knowing it. It is also proper to remark, that neither of the samples were obtained with a view to making the experiments which followed, and, so far as I know, the inferior article might have come as readily from one dealer as from the other; I only know it happened so. We want to make a careful series of experiments in order to determine satisfactorily in what part or parts of the various plants employed in practice, resides the active medicinal principal; what strength and kind of menstruum is required to obtain the best results; and it is my impression that when we have gone to the bottom of this matter, we shall arrive at about the same conclusion as Professor King, viz.: that more uniform and reliable preparations may be obtained with ninety per cent alcohol, than by any other means. By that menstruum the fibre, starch and mucilage will be rejected, and we shall be enabled to administer our medicines in small concentrated doses, acceptable to the patient and convenient to the physician.

It is much to be regretted that all our medical schools, and particularly our Eclectic colleges, have no chair of practical pharmacy, for it would be of far greater value to the student than his professor of materia medica, who at best, in the majority of cases, in all schools is only a *reader* of the pharmacopœia.

Mr. President: Our experience has taught us that most physicians have only a theoretical knowledge of the medicines which they are in the daily habit of prescribing, and if the crude or manufactured article were submitted for their inspection, they could not decide upon the quality or tell the name of one in ten. Now this is all wrong, and very humiliating to the whole profession, and should be corrected as soon as possible. Physicians should either prepare their own medicines, or know when they are of the right quality and properly compounded.

Thousands upon thousands of patients have lost their lives through this want of knowledge on the part of their medical advisers. The student is taught at college the history, properties, uses and doses of the various medicines used in practice, and this is all the practical knowledge which is imparted to him in regard to them. On this very slender capital he enters into active prac-

tice—is called to see a patient and prescribes for him. He calls again on the following day to ascertain the result of his treatment. He is disappointed; the desired indication has not been fulfilled. He makes a second formula with the same success, never for a moment suspecting that the fault was not in his prescription, or in the stubborness of his patient's case, but in the quality of the articles, and the compounding of the same.

Now, I ask, to what does this lead? Vastly more than we are apt to think. There is a great mischief hidden beneath it, to all concerned. Let us reflect for a moment. The physician loses all confidence in medicine, through his want of success, and either abandons his profession in disgust, or what is much worse, goes into the *placebo* business of retailing sugar pellets. Well hath the poet said :

"To what base uses may we not return at last."

Secondly. The poor patient not receiving that benefit which he had a right to expect from his medical attendant, who had been educated to heal the sick, becomes discouraged, and often prefers to suffer on and die rather than to be experimented with in the dark.

Mr. President and gentlemen of the Society, I do most sincerely hope that the trustees of this college will not permit another session to pass away without creating and filling a chair of practical pharmacy, which may include that of materia medica, and, further, that the faculty of this institution will permit no student to leave these walls with the degree of doctor of medicine until he not only knows how to write his prescription properly, but also to compound it scientifically. For one, I feel a deep interest in the great enterprise which has been inaugurated in this college. It devolves upon you, Mr. President, upon me, and all here, to see that it fail not; for it is of momentous importance to the health and well being of the community. The men we send forth to minister to the sick must not only be equal in their acquirements to those of any other school of medicine, but superior; for if they are not so, then our enterprise is uncalled for and a failure.

There is much I would like to say upon this subject, but I feel I am trespassing upon your time and patience. In starting, I promised to tell you how I prepared those medicines, and I will now do so briefly, and close.

First. I take one pound of the crude material, having first made

it about as fine as coarse ground coffee, and saturate it with equal parts of ninety-five per cent alcohol and water for two or three days, in a warm, dark place. I next place the mass in a percolator, allowing all the fluid to pass off that will; this I set aside, adding fresh alcohol and water to the contents of the perculator, which passes in the same manner as the first, until I have obtained the desired quantity. I next remove the material to the press and express the remaining fluid, adding it to the first and second, and complete the process by filtering it through a paper or other material. To make it clearer, I will give you my formula on the black board:

R.	Leptandra,	oz. xvi.
	Spirits Rectificatus,	
	Aqua pura (of each),	O. i.
M.		

Saturate from forty-eight hours to fourteen days, according to your time and convenience.

I do not employ acids, ether or artificial heat in my process, believing that all the medicinal properties may be extracted as well with equal parts of undiluted alcohol and water. There are many other points of interest connected with the manufacture and preparation of vegetable medicines which I would like to discuss, but the time will not permit.

In the selection of drugs of all kinds, much experience is required to determine their quality and precise value. In the manufacture and preparation of vegetable medicines, particularly those which are highly concentrated, great skill, judgment and nice manipulation are requisite in order to obtain the best results.

Thanking you for your attention and patience, I leave this important work in your hands, trusting that those more competent to teach, will take hold of this subject, and by their researches, raise still higher the standard of Eclectic medicine and practice.

ARTICLE XXVII.

Case of Poisoning by Arsenic. Read before the Electic Medical Society of the City of New York, Feb. 20th, 1867. By Paul W. Allen, M. D., Professor of Theory and Practice of Medicine in the Eclectic Medical College of the City of New York.

On the morning of January 10th, 1867, the day after the semi-annual meeting of the Massachusetts Eclectic Medical Society, I went with Dr. Geddes, into the office of Dr. Joseph Jackson, 106 Court street, Boston. Dr. Geddes and myself had been in the office but a few moments, in waiting for Dr. Jackson to arrive, when a young gentlemen and lady entered and inquired for him. We assured the parties that Dr. Jackson would soon be in. The gentleman seemed greatly in haste for a physician, and soon after stated that he could not wait, that the lady had taken arsenic—a large dose—and that he wished a physician immediately, and inquired where they could find one. The case was referred to me. "Have you taken arsenic?" "Yes, sir," replied the young lady before us, a person beautifully developed in form and feature, with dark hair and lustrous eyes, and looking all too lovely to have known sorrow, or committed such a sin as attempted suicide. Besides, that "Yes sir," was spoken with such serenity, and with so bland a smile upon her countenance, that for a moment we almost doubted whether she were not attempting some deception. We instantly continued our inquires. "How long since you took the arsenic?" "Half an hour, perhaps." "How much did you take?" "A large dose, sir; but I didn't measure it." "Did you know it was very poisonous, and liable to kill you?" "I supposed it would. I took a large dose. It will do no good to give me anything. I think it will kill me."

We ordered fifteen grains of sulphate of zinc, immediately, in a little water, and quickly sent to M. Metcalf's, for a bottle of the Hydratum Oxidum Ferri, and resumed our examination.

"Did you take breakfast before taking the arsenic, or did you take it on an empty stomach?" "I have not eaten anything for nearly two days." "Do you feel any sickness or distress at the stomach?" "No, sir; I feel a little faint and sinking. I think it will kill me. Doctor, it's no use to give me medicine." "Did you expect it would kill you?" "Yes, sir." "I pity you most

sincerely. I will do whatever science can do for you. It is my duty to save you." "How can you save me? I took a great deal—a teaspoonful, at least," she said, with what seemed to be a triumphant smile. "What made you take it?" "I wanted to; I am tired of living." "I want to send for your friends; what street do they live in?" "I have no friends here; I am a stranger. I lodge at No. —, —— street, and take my meals at the eating saloons. My home is in ——, in the State of ——." By this time the emetic had acted promptly, and plenty of water was given to make the emesis more thorough, so as to dislodge all we could from the mucous membrane. There was no food, in fact nothing but mucus and the water, until we had repeated the emetic doses three times. Then a white powder, more than half a teaspoonful in quantity, was seen in the bottom of the pail into which she had vomited. She vomited immediately after each dose, and we followed each emesis with nearly a tablespoonful of the ferri hyd. ox., in a little cold water. She still seemed perfectly composed, just as ready to die as to live; but her pulse became rapidly weaker, her hands became cold, the "damp cold sweat," was upon her fair face and neck and hands; she breathed in sighs of evident difficulty, and the case really seemed like the collapse of impending dissolution. But her mind was clear, weak as she was. Calmly she asked, "what is the ground of your hope to save me?" "We are getting all the poison out of your stomach that we can, by emetics; and we are trying to neutralize the rest with this iron, which is a chemical antidote. Where did you get the arsenic?" "At Mr. ——'s, the apothecary, in —— street." "Why did he let you have it?" "I have been there before to get arsenic to stop my toothache." "Did you take all he gave you?" "No, sir; here is a little," taking a small white folded paper, marked "Poison," from her pocket. We opened it, found some twenty grains of arsenic, sent it to the apothecary, and ascertained that he had given her "ten cents worth," unweighed. Lest the poison might not all be thrown off, we advised, along with Dr. Jackson, who had now arrived, that three more doses of the zinc should be administered. But the pallor and pulselessness of our patient began to make us somewhat fearful of the results of the case. From the young man who had accompanied the lady from the manufactory in which they and many others were employed, we could get no clue as to the cause of this poisoning, but only that

she had come into the factory, and taken the arsenic in a little water.

Life was so uncertain, and death seemed so near, that we now sought the reason for so terrible an act as suicide, in one whose amiable and queenly countenance indicated that she was intended for happiness herself, and to make happy all those around her. We said: "You may not live; be hopeful; we will do all we can. Have you a father and mother?" "No mother; she is dead, and no friends here." "Have you a father?" Yes, sir." "Where does he live?" "In ——, State of ——." "Your father may forgive you—doubtless he will; but, as your father, he will want to know why you have done this. Have you any reason to give?" Waiting for an answer, we said again: "Have you been disappointed in your plans or affections?" "Some, in my affections, but I don't wish to speak much of it." We assured her that she was with those whose experience had made them acquainted with all the varied phases of life, who knew human hearts and personal histories of every shade. and that she could speak with generous confidence; and that if she had any private message to send to her father, in the possible event of death, we would most religiously fulfill our duty, and the world would know it not. But she had no message. We took her father's address and her own, and asked: "What shall I write to him?" "Tell father to come and get me," was her reply. We tried to convince her, in a few faithful words, of the sinful rashness of her deed, and to lead her mind to penitence, that she might hope for forgiveness, even in such an emergency. We were now compelled to leave, to meet an engagement, by the cars, in a distant town, and, after expressing our ardent hope that she might recover, and never again give way to such desperation of despondency, we consulted with Dr. Jackson, and left her future in his faithful care.

We confess that our minds frequently reverted to the case, now with hope and then with fear, for some days; but were much gratified to receive a note from Dr. Jackson, giving a record of the case, from which we state the following, essentially in his own words: "Soon after you left, the symptoms became still more marked and grave. A general coldness seemed to pervade the whole system. The extremities became very cold, clammy, and numb. She had vertigo and faintness. The burning at the stomach became quite acute, attended with great oppression in

the region of the heart, and considerable dyspnœa. Pulsation at the wrist was almost extinct, and remained so for three hours, Painful retching became quite prominent, and also a general uneasiness, which was quite troublesome. The zinc, with the copious drinks of warm water, produced very profuse vomiting. dislodging another, and very considerable, portion of arsenic. Warm water and milk, thickened with flour, was then given quite freely; which relieved the burning at the stomach very much. The ferri oxidum hydratum was given in tablespoonful doses, mixed in cold water, every few minutes, for two hours; and then every half hour until six o'clock in the evening, when she was conveyed home in a carriage. At nine o'clock in the evening she was doing well, and the iron was continued, once an hour, through the night. On Friday, the 11th, she was much better, having passed a comparatively comfortable night; but she had much soreness in the stomach and bowels, and a general soreness all over the body.

Saturday, Jan. 12th.—She is still better than yesterday.

Sunday, 13th.—The patient is not so well as yesterday; feels very lame all over her system, and is in bed; complains of a terribly sinking sensation in the stomach and bowels, on assuming an upright position.

Monday, 14th.—Is much better to-day.

Tuesday, 15th.—Still improving, and talks of resuming her work in a day or two.

With a few suggestions, I leave this case with the reader.

First. It seems to us that zinc is the best remedy to produce emesis in most cases of poisoning. It is prompt and painless and powerful. Ipecac and lobelia would not probably have acted so promptly, and they might not have operated until fatal inflammation of the stomach had been produced. Besides, their nauseating effect would probably have relaxed the mucous membrane of the stomach, and rendered a degree of absorption more probable; and we say a degree, for arsenious acid is only very slightly soluble in either hot water, cold water, or the fluids of the stomach; but acts mostly as a violent local irritant, destroying the coats of the stomach by the inflammation induced. All medical men are aware that this is the action of arsenic in cases of acute poisoning from this agent, and if any are interested to know the exact appearances of the stomach, upon post mortem, we would refer

them to the beautifully colored plates in the English edition of Hope's Pathological Anatomy.

Secondly. The symptoms of arsenical poisoning, especially the burning sensation and vomiting, usually come on within an hour; although in a few instances not under six or eight hours. Considering how entirely empty this patient's stomach was, it seems a little remarkable that these symptoms did not supervene under nearly two hours.

Thirdly. We see the practical usefulness of repeated emetics. Had these not been continued she might have died from the effects of that portion of the poison vomited in the second instance. There was probably enough left, after the first quantity was ejected, to have killed half a dozen persons, if it had not been either vomited, or entirely neutralized by the iron.

Fourthly. It may not be known to all our medical friends that the ferri ox. hyd. is put up in bottles, ready to be permanently kept, and instantly used when needed, and that single bottles of it can be procured at the drug houses. Mr. Proctor, of Philadelphia, prepares this article, and his preparation is reliable; and other manufacturers may be equally so. Every physician should either have the iron, or know at what drug store it can instantly be obtained.

Lastly. Every person who has seen cases of poisoning by arsenic must have noticed its remarkable effect upon those nerves of organic life distributed to the stomach—producing extreme faintness and almost absolute prostration and collapse. The respiratory and circulating functions, as well as the nerve power of the entire system, are most powerfully affected by the direct and sympathetic action of arsenic and other poisons, upon this system of nerves. In fact, the impression of medicines, as well as of poisons, upon the nerves of organic life, is one eminently worthy of the study of every physician; and the relative absorption of different medicines by the mucous membrane, and the conditions of that absorption, is a subject to be kept constantly in view by every person who would administer remedies intelligently and successfully.

ARTICLE XXVIII.

A Singular Case of Strangulated Inguinal Hernia (Epiplocele, with Dropsy of the Omental Sac). Successful Operation. Read before the Eclectic Medical Society of the City of New York, Feb. 20, 1867. By EDWIN FREEMAN, M. D., Professor of Anatomy in the Eclectic Medical College of the City of New York.

On January 14th, 1867, I was solicited by Dr. Miles, of this city, to operate on Mrs. Taylor, a lady about thirty years of age, who was suffering from strangulated hernia, and was in great danger. I found the patient with a tumor in the right inguinal region, extending in the direction of and into the inguinal canal, about as large as a medium sized orange, round external to the external ring, very tense and unyielding, and extremely sensitive to pressure, or even to touch. She said that it was much larger and firmer than on the evening before, and her suffering from it was very great, the inflammation evidently extending to the adjacent portion of the peritoneum. The hernia had been out about three weeks, with a considerable occasional pain; but she had neglected to have her physician see her to reduce it, as had usually been done. For the last five or six days it had been strangulated, and on the 11th of January, when he was called in, it could not be returned. She was first ruptured on the right side, five years ago, and on the left three years ago, by straining while lifting, and so was ruptured on both sides. The doctor reduced it a number of times, and for a while she wore a truss. For the last six or seven months her right side only had given her any trouble.

Various efforts to reduce it by taxis had been made previous to my being called in, but without success. Tobacco poultices, alternated with bags of ice, applied to the tumor, were also unsuccessful. Indeed all measures previously used had been of no avail, except to aggravate the case. She had had two operations from the bowels since the stangulation, one from a dose of oil, another from a dose of pills, and there had not been at any time stercoraceous vomiting. From this it was evident to me, that the bowel was not included in the hernial tumor; that it was a protrusion of the omentum, with whatever other aggravating features there might be; and I expressed such to be my opinion. It was possible, however, that the operation might be a mere evacuation of

the contents of the lower bowel. After consultation with Drs. Miles and Linn, his associates in practice, and Prof. Youart, who accompanied me, we concluded to try taxis again, persistently, until satisfied that that would not return it; then to try taxis with the hips elevated, so as to incline the body to an angle of at least forty-five degrees; and, lastly, to force a large injection into the bowel, and see what would be the result. Neither of the first two measures made any impression on the tumor; the last evacuated the bowels. It was then thought best to administer an anæsthetic, and try taxis, and, in the event of its not succeeding, to operate. A mixture of equal parts of chloroform and ether was then carefully administered by Dr. Miles. It was fully half an hour before she was completely under its influence, and at the latter part of the operation, the chloroform alone was used. She was obliged to inhale so much of the anæsthetic at first, that before the operation was half over she ceased to breathe, but was recovered by using actively and carefully Sir Marshall Hall's method of restoring suspended respiration, which in my hands has always proved successful when there is the same result from the use of an anæsthetic. When she was fully etherized, I made an incision about three inches in length, over the neck of the sac, in the direction of the axis of the inguinal canal, and divided upon a director the several layers, until the sac was fully exposed. When the external ring was reached, I found the fibres of the inter-columnar fascia pressing so tightly upon the neck of the tumor, as to be of itself a sufficient cause of strangulation. Those were severed by cutting upwards, guided by a director, which was with difficulty insinuated beneath. Still no impression could be made upon the tumor, and I then took up and divided several other thin laminæ, such as it is always possible to raise, where all the natural coverings and the connective tissue are so thickened and indurated by surrounding inflammation. After exploring with my finger to the internal ring, and finding no further stricture either there or in the caual, I concluded to open the sac, which appeared of a gray color, indurated, tense, firm, and thicker and tougher than the hernial sac usually appears. By pinching up with the forceps and cutting a small portion of the sac, a slight opening was made, through which a large quantity of water gushed out with a considerable force, and continued to run until at least a pint had escaped.

I immediately passed into it my director, and cutting upward and forward upon it, I opened the sac sufficiently to explore it

and examine its contents. There was no intestine in the sac, and it was continuous with a large sac in the abdominal cavity, through the inguinal rings, or the *canal of Nuck*. I passed my finger into the cavity, and explored in each direction. The boundary of the internal sac seemed to be nearly opposite the umbilicus above, beyond the median line to the left, and extending but a little to the right of the ring. There was no contained intestine, and none to be felt in any direction. It had contained water, which was evacuted on first opening the sac. The fluid, on escaping, had something of the appearance of light colored urine, but not the urinous odor. The wall of the external sac appeared thick enough to be the wall of the bladder, but on passing the catheter into the bladder, and pressing towards the finger in the sac, the separate cavities were determined. From the appearance presented, and all the circumstances of the case, I concluded that, for the last three weeks there had been hernia of the omentum; that the inflammation developed in that sac had resulted in effusion into it; that the pressure outward of the effusion had consolidated it with the proper hernial sac, and that its limits within the abdomen were produced by a glueing together of the walls of the sac, from the same or some previous inflammation, for I have observed that, in a great majority of subjects examined where there has been no such protrusion, the walls of this sac are adhered together.

Before closing the wound it seemed best to adopt some measures by which the neck of the sac should be closed, and the sac itself permanently obliterated, so as to prevent any subsequent protrusion. I therefore passed a silk ligature around the neck of the sac, by means of a curved needle, and tied it sufficiently tight to close it up completely, but not sufficiently to produce mortification of the sac and its consequent sloughing. I thought that the handling of the sac would be sufficient to create a considerable inflammation, sufficient, both internally and externally, in connection with slight pressure, to produce obliteration, and in this I was not disappointed. I then closed the wound with interrupted sutures and adhesive straps, leaving the long ends of the ligature hanging out. Thus far we were successful, and the anæsthesia having passed off, the patient knew nothing of the operation. We agreed to apply a slight compress and a figure-of-eight bandage around the hips and thigh. A cloth was laid over the wound, extending to the left and right over the hypogastric and border of the right iliac region, wet with

℞.	Tinc. Aconiti Rad.	oz. i.
	Tinc. Arnicæ,	oz. iv.
	Aquæ,	oz. xiv.
M.		

the cloth to be kept constantly moist. An opium pill was administered, and she was directed to take of

℞.	Tinc. Aconiti Rad.,	gtt. xx.
	Con. Tinc. Gelsemin,	dr. i.
	Syr. Simplicis,	oz. ss.
	Aquæ Menth. Pip.	drs. vij.
M.		

a teaspoonful every two or three hours. She was allowed wine, beef tea, and like fluid concentrated food. She was left under the care of Drs. Miles and Linn. January 19: her strength had been supported very well. There was slight peritonitis, which was kept under by the gelseminum and aconite and the wet compress. I took out the sutures. January 22: she had a slight chill. The doctor is giving her

℞.	Quiniæ Sulph.,	dr. i.
	Tinc. Ferri Mur.,	drs. ij.
	Aquæ Dest.,	oz. xij.
M.		

A dessert-spoonful three times a day.

She improved from this onward. The ligature was wound around a small cylinder of adhesive plaster, and tension kept upon it by turning it every day. It came out February 3d, passing entirely through the neck of the sac. The external wound then completely closed up. She is now able to sit up, and feels nearly as strong on that side as ever before the rupture, and probably will overcome all weakness, when the new adhesions and cicatrix shall have had time to take on the firmness of the other tissues. I know of no better agent for a local application for preventing peritonitis after such an operation than the aconite and arnica, sometimes combined with spts. camphoræ; and none for internal administration better than the gelseminum and aconite.

ARTICLE XXIX.

Puerperal Convulsions. An Essay read before the Eclectic Medical Society of the City of New York, May 15th, 1867. By A. B. WHITNEY, M. D.

Puerperal convulsions were known in early time to the originators and fathers of the profession, and have, from their frequency and formidable character, occasioned much speculation as to their origin and cause, in every age. Hippocrates regarded them as arising from opposite extremes—repletion or depletion—and observed that patients, in either of these two morbid conditions, were peculiarly exposed to an attack.

Galen, while supporting these views, added another cause, or item, to the pathological condition, to which he attributed great importance. He regarded their presence due more especially to the excitability and irritation of the nervous system, caused by a morbid humor.

Etius, Silvius and many other eminent scholars advanced and maintained the same general principle, and regarded their origin as due mainly to some direct nervous disturbance, or mental agitation and disquietude. They all attribute their cause more to the nervous system and animal spirits than to the influence of morbid humors, as their predecessors had done.

These views continued unchanged for a very long period, and governed the profession till the appearance of the works of Frederick Hoffmann, about the middle of the eighteenth century, in which he gives the result of a more thorough and accurate investigation. He regarded puerperal convulsions as attributable chiefly, if not wholly, to a morbid state of the spinal cord and its membranes. This opinion, with some variations, has been extensively adopted by pathologists of the present day.

From the term employed to designate these peculiar developments—puerperal convulsions—it would appear that the earlier writers regarded them as especially confined to the parturient state, or dependent upon the disturbance caused by the process of parturition. In this view, however, they were evidently mistaken; for these convulsions, in their peculiar and distinctive character, may occur at any time of utero-gestation, or during the process of

parturition, or during the first few weeks of lactation. Though seldom, yet occasionally, they appear at the very commencement of utero-gestation, and proceed periodically, with undeviating regularity, increasing in severity and violence at each recurrence, during this entire process, and terminating only with parturition, or within a few weeks subsequent to that event.

Whatever be the period of attack, whether during the process of parturition, or prior to, or subsequent to that event, they present one of the most formidable and perilous complications attending child-birth. Under whatever circumstances they may occur, their presence is fraught with more or less hazard to both mother and child, and, therefore, they claim the most deliberate, and earnest consideration of the accoucheur.

These convulsions are usually exhibited in an irregular and varied form, and mainly consist in a rigidity and forcible extension of the limbs, with a flushed and livid countenance; sometimes in violent and involuntary contractions of a part, or of all the muscles of the body; often in irregular agitations and alternating shocks, suddenly drawing the head and feet backwards, so that the body, bending like a bow, rests on the heels and occiput. At the full period of gestation the opisthotonos is often so complete as to threaten rupture of the uterus from the curvature and tension of the distended abdomen. The contractions become frightful, and the danger to both mother and child imminent.

The premonitory symptoms in some cases are definitely and strongly marked. In others they are entirely wanting.

The sudden attack is more frequently exhibited by an extension of the limbs, contraction of the muscles of the face, followed by involuntary and spasmodic contractions, or general convulsions of a violent and irregular character, resembling the usual convulsions of the epileptic or hysterical paroxysm. The respiration becomes oppressed, imperfect, and sometimes laborious; the tongue is often protruded; the eyes fixed, staring and sometimes rolling; the countenance flushed, red and often livid; the limbs strongly convulsed, and sensibility and consciousness gone. After a short time these urgent symptoms all subside, the paroxysm is passed, and a comatose stupor ensues. But soon, however, this is succeeded by another fit more severe and violent, or perhaps of a milder type.

Thus these convulsions succeed each other at longer or shorter intervals till several paroxysms have occurred. In some instances

two or three, in others eight or ten, or more occur; when they usually, if the prognosis be favorable, terminate, leaving the patient in a relaxed or exhausted condition, or in a peculiar state of profound stupor, from which, after a short period, the exhausted patient being entirely unconscious of what has happened, suddenly recovers, as if awakened from a sound slumber.

These convulsions may approach, and even assume, in a complicated and aggravated form, the character of epilepsy, and present in their progress all the distinctive features of that disease. In a mild form, when occurring early in utero-gestation, they may be taken for epilepsy, without even exciting the suspicion that they are connected with, and dependent on, that process. Even their presence may be erroneously regarded as indicative of the non-enciente state of the patient, and their peculiar character pass unperceived till they become so fully established, and so very formidable, as to create, in their frequent recurrence, great anxiety and alarm, and in reality jeopardise the life of the patient.

In other cases they resemble, and even exhibit the more striking features of, apoplexy. In this form they become very formidable, often baffling the experience and skill of the physician, and continue unrelieved, increasing in violence and severity, and in the frequence of their recurrence. This form may be regarded as the more hazardous and the more fatal.

But, perhaps, these convulsions more commonly resemble hysteria, and may in some instances be regarded as such, in an aggravated form. In the premonitory symptoms, when present, and in the sudden attack, there is a striking resemblance indicating, in all respects, the hysterical paroxysm. It seems to be extremely difficult in many instances to distinguish between hysterical and puerperal convulsions, except by the circumstances under which the latter occur. So close is the resemblance as to lead to the supposition that both proceed from a similar pathological condition, excepting only the specific cause, giving name to the latter, being superadded.

The pathology of puerperal convulsions is quite too vague and indefinite to satisfy the close observer and thorough student. The whole subject is involved in some obscurity, and, as yet, remains quite unsettled. It, therefore, requires a more critical investigation and minute detail of the morbid appearances, for a right understanding of the subject, than can be given in this brief essay.

The prognosis is less difficult and becomes favorable or unfavor-

able, from the causes from which these convulsions are superinduced; from the ever-varying circumstances under which they occur, and the effects and injury inflicted upon the nervous system.

In this imperfect sketch of the nature and character of puerperal convulsions, we have given but a mere skeleton, which seems sufficient for our present purpose, to elicit discussion, and ascertain, if practicable, what may be the best, safest and most efficient mode of relief and cure.

Here we might observe that some women are more liable to convulsions than others. The delicate, the nervous, the anæmic, and the hysterical, are peculiarly exposed to an attack. Dr. Denman observes that "women are more liable to convulsions in the *first* than subsequent labors; and more frequently when the child is dead, than when living. But when convulsions occur the death of the child ought generally to be considered the *effect* rather than the *cause*, as they have often been delivered of living children when they were in convulsions, and of dead, and even putrid children, without any tendency to convulsions."

Dr. Churchill has adduced a variety of statistics illustrative of the frequency of their occurrence, and the result of practice in the lying-in-hospitals in France and England, which we deem worthy of special consideration.

He observes that there were in

1,897	cases of labor	atten'd by	Dr.	Bland,	2	cases convulsions.
10,387	do	do	do	J. Clarke,	19	do
2,947	do	do	do	Merriman,	5	do
640	do	do	do	Granville,	1	do
389	do	do	do	Cusack,	6	do
848	do	do	do	Maunsal,	4	do
16,654	do	do	do	Collins,	30	do
399	do	do	do	Beatty,	1	do
1,266	do	do	do	Ashwell,	3	do
2,510	do	do	do	Montell,	6	do
600	do	do	do	Churchill,	2	do
20,357	do	do	Md.	Boiven,	19	do
38,000	do	do	do	LaChappelle	61	do

He gives, as the result of treatment and the accruing bills of mortality, the following summary:

Of 4	cases treated	by	Dr. Gifford,	2	mothers were	lost.
8	do	do	Smellie,	2	do	do
14	do	do	Perfect,	5	do	do

2	cases	treated	by Dr. Bland,	0	mothers	were lost.
19	do	do	Jas. Clarke,	6	do	do
36	do	do	Merriman,	8	do	do
26	do	do	Ramsbotham,	10	do	do
4	do	do	Munsell,	2	do	do
30	do	do	Collins,	5	do	do
1	do	do	Beatty,	0	do	do
2	do	do	Churchill,	0	do	do
6	do	do	Montell,	2	do	do

Out of the 152 cases of this list of puerperal convulsions treated by the above named physicians, 42 mothers were lost, which is a little more than 27 per cent. Drs. Ramsbotham and Cullen are reported to have been very unsuccessful in adopting the practice of version, having lost the mother in every case in which the attempt was made.

Of 59 cases in which convulsions occurred, there were 17 before labor was instituted, 28 during the process, and 14 after its termination. There were three cases of twins; 45 were first births; 13 of the women died; of the children, 41 were expelled naturally by the head; 6 were delivered by craniotomy, 6 by the forceps, 5 by turning, and four presented with the breech; 23 only were born alive, and 12 of these were born before the attack of convulsions took place, leaving only 11 out of the 59 born alive after convulsions ensued—a little more than 81⅓ per cent loss.

Dr. Simpson, describing the pecular form of this disease termed puerperal mania, gives the date of attack in 92 cases, presenting very accurately the time at which the first symptoms made their appearance. He observes:

16	were	attacked	from the 1st	to the	4th	day after	delivery.
21	do	do	5th	do	15th	do	do
17	do	do	16th	do	60th	do	do
19	do	do	60th	do	120th	do	do

And 19 after the mothers had voluntarily weaned their children. These are very peculiar and interesting facts, especially worthy of consideration in the management and treatment of those patients peculiarly liable to this disease. It is better to anticipate and guard against its occurrence, than to neglect the premonitory symptoms and tendencies, and wait for its sudden and full development, when relief and cure become extremely doubtful.

The true puerperal convulsions, says Dr. Ramsbotham, may

occur at any period of the latter half of pregnancy, or in any stage of labor; not unfrequently many hours even after the child is born, and the process of labor is completed. Occasionally these convulsions appear early in pregnancy; and Dr. Perfect gives us two cases in which they attacked the patient before quickening, and Dr. Meigs one at five months.

Dr. Copeland says convulsions may come on during the latter months of pregnancy, during parturition, and during the first fortnight after delivery. They may be partial or general, most commonly the latter.

Drs. Churchill, Bedford, Meigs and many others entertain views similar to the above, in regard to the time of attack. They have not appeared to notice the fact, that these convulsions may and sometimes do occur simultaneously with conception, and continue periodically through the entire process of utero-gestation; sometimes recurring every two weeks, or every four, or even at intervals of six weeks. Sometimes they commence thus early, and continue increasing in frequency and violence, and often during the last month of pregnancy recur every week.

The great and important question especially effecting the interests of patients and physicians, is the general principle and mode of practice to be adopted in the treatment of this disease. It is quite obvious the general course pursued in these cases has but little, and, perhaps, in most instances, no reference at all to the pathological condition. This, however, may be unobserved and unappreciated, and the real cause of the fits pass unnoticed; or the cause may be so obscure as to render the application of science unavailing for the adaptation of a rational and successful mode of practice.

Hence in these convulsions, as well as in some other forms of disease, the practice recommended by some noted authors, and generally followed by a part of the profession, is to a great extent empirical. In confirmation of this, we might adduce a few quotations from some of the most celebrated authors, but time will not permit. We shall, therefore, close our remarks by giving a brief view of our own practice in these cases.

When occurring early in utero gestation, or at any time during that process, or subsequent to parturition, they should be treated by uterine tonics and sedatives. If complicated by the existence of any other disease, the treatment must be varied and adapted to meet the indications and developments of disease, as the same may

arise. But when they occur on the eve of parturition, or during the process, they require prompt relief.

This relief is best attained by resorting to the most speedy means of delivery. Chloroform should be at once administered in such manner as to control, if not suspend the paroxysm. The belladonna ointment should be applied in cases where the uterus is closed, or only partially dilated, and should, when necessary, be followed at the proper time by the employment of Barnes' dilator, which in the course of an hour or so, fully prepares the way for the easy application of the forceps. There should be no hesitation concerning this artificial interference and apparent premature delivery. The use of instruments as speedily as practicable is urgently demanded. Life is endangered. The experience and skill of the physician is called to save it. He should not only be prepared, but even prove himself fully competent to meet the emergency.

In this course of procedure there is great hope, and almost perfect assurance of saving unharmed both mother and child; while, on the other hand, to postpone and delay action, after clear, decided and positive evidence that the time for parturition has fully come, often sacrifices the life of the child, and perils, if it does not extinguish, the life of the mother. Giving due consideration to our own observations and practice, we can speak advisedly on this subject, and cheerfully recommend this course of practice which we have adopted as the wisest, and the safest, in puerperal convulsions, for all concerned.

ARTICLE XXX.

Veratrum Viride. New Properties Discovered. A specific in Erysipelas and Erysipelatous Inflammation, Carbuncle and Mammary Abscess. How and when to use it. How to treat when taken in over quantity. An Essay read before the Eclectic Medical Society of the City of New York, July 18th, 1867. By Robert S. Newton, M. D., Professor of Surgery in the Eclectic Medical College of the City of New York.

During the last ten years the Eclectic medical profession have given much attention not only to introducing new remedial agents, but to carefully testing many that have already been in use, to see if they contained other principles and actions than those already known to have been possessed. No remedy has been more carefully examined than the veratrum viride. To the Eclectic medical profession belong almost the entire credit of these experiments. They did not first introduce this agent, yet they have developed its true therapeutic property and used it more extensively than all the other schools of practice, and what they claimed for it many years since has been fully verified by other practitioners, so much so that at this day, with those physicians who have used it in pneumonia, pleurisy, in local and general congestions, as well as in all conditions where there is an abnormal or too frequent action of the heart, as far as we are informed, not one has discontinued its use, or have they in a single instance hesitated to say that it entirely contra-indicated the use of the lancet, tartar emetic, digitalis, or the whole antiphlogistic catalogue of resources. European physicians are now trying this as they did podophyllin, leptandrin, macrotin, and many other of the Eclectic remedies, and it is really gratifying to know that this is proving as satisfactory in their hands as did the other remedies named. We hope, too, that they will report fully upon this as they did upon the others, which was done through the London Lancet and Braithwaite's Retrospect. At this time several of the German Medical Journals are filled with the testings of the veratrum viride and the gelseminum, being called "American Eclectic Remedies." They quote our authors freely, and are disposed to give our school of practice full credit for the introduction of so many valuable articles of the materia medica.

With these general remarks, I now propose to give the profes-

sion the results of my own observations upon this agent, as regards new properties and its use for conditions never before made known, so far as I am informed.

I do not propose to examine the principle upon which this agent acts, further than to say that it so influences the nervous tissue of the heart as to reduce its normal as well as abnormal action by a kind of paralyzing influence, whether it is antispasmodic, narcotic, or neither, having nothing to do with the specific actions which I know it possesses. The disease in which it has been extensively used by me, and to which I refer above is erysipelas, local or general, acute or chronic, and it is just as complete a specific in this disease as it is in pneumonia, pleurisy, and other diseases for which it is now so successfully used by our school.

Any form of local erysipelas, if pencilled over freely with the concentrated tincture or the fluid extract of the veratrum viride every three or four hours, will lose all its redness and burning in from ten to twenty hours, and in many cases relief will be found in a few minutes. This application should be continued until the object is accomplished, which, in cases where the system has become fully diseased, may require a longer period to accomplish entirely. By allowing the medicine to extend beyond the diseased part, it will prevent its extension, as a general thing. When the face and head are the seat of the disease, and much swollen, the tincture may, in addition to the application with the pencil, be added to cold water, one dram to ten ounces, in which cloths should be wet and placed over the swollen parts. This should be done after the regular pencilling. This keeps the parts moist and allows the medicine to act by being absorbed; in this way the capillary vessels are contracted in size, and by the action on the whole external system the blood is equalized, the quick hard pulse which always attends this disease in its active form is overcome, and the pain of the head as well as all the other violent and dangerous symptoms, in even this short time, subside. The congestion of the brain being removed, the coma or delirium subsides, and the patient soon resumes his reason and accustomed habits. I have in many cases relieved the most malignant form of this disease in a few hours, when there was no lesion of structure of the brain. If suppuration should have taken place, as it does in many cases, I use the pulv. elm bark mixed in cold water and the tincture of the veratrum viride, one dram to four ounces of water, this to be renewed four or five times in the twenty-four hours.

The internal use of this agent in small doses should be continued throughout the treatment. The quantity to be given must depend on the circumstances of the case; but my rule, generally, is to give as much as the patient can take without producing nausea. The wonderful success which I have had with this medicine in the treatment of this disease, warrants me in saying that the materia medica does not contain any one or more agents to be compared with this, and, too, that it is as certain in its action in ordinary erysipelatous inflammation, as is the sulphate of zinc in curing gangrene, which was discovered and published by me in 1846. It will always, if applied in the early stage, arrest the further development of carbuncle or mammary abscess, and in inflammatory rheumatism, internally or externally, it acts with equal success.

I hope the profession will give the subject a careful consideration and trial, and report their results to the "Review." Many of our most valuable and common agents, no doubt, possess medicinal properties not yet developed, even more valuable than those already discovered, and by testing them in this way we learn their varied and useful effects. One of the peculiar properties of this medicine, one that should not be lost sight of, is, that under no circumstance or condition for which it is used in medicinal quantities will it permanently impair the strength of the system. If given in an overdose, it will at once produce nausea or vomiting, or both, depending on the quantity given. In this way the system always manifests by its own action the quantity necessary to produce its *specific action.* Extreme nausea or vomiting with the medicine is never necessary to obtain its full therapeutic effect. The stomach itself, unless given by mistake and in poisonous doses, will in all cases relieve itself at once by ejecting it. When vomiting does take place, the ejection will in most cases resemble yellow bile, while in many instances it has the appearance of the yolk of eggs well beaten up. To aid this vomiting, warm water should be given freely until all the medicine and the contents of the stomach are thrown off. The nausea will in many cases continue for several hours; this can be arrested by giving, in small quantities, the tincture of gelseminum and small doses of good brandy or whiskey.

If the quantity given should reduce the pulse to fifty-five, or even as low as fifty, and be attended by great difficulty of breath-

ing, I use the brandy in large quantities, six or eight ounces every fifteen minutes, until reaction comes on, which will be manifested by the appearance of a warm perspiration, lessening of the nausea and vomiting, ease in breathing, and the gradual return of the pulse to its normal condition. I have treated cases where it had been taken, although not prescribed by physicians, in such doses as to produce the alarming symptoms, when I have used from one pint to one quart of the very best brandy within one hour. Although it succeeded in re-establishing a healthy action of the heart, the brandy did not produce any further visible stimulating effect. I have often done the same in the collapsed state of Asiatic cholera and fatal hemorrhage. While these latter remarks have reference to ourselves, I will say that no judicious physician will ever prescribe this medicine in such doses as to produce a condition necessary to require this subsequent treatment.

I think a continuation in small doses, when this medicine is used, much better than very large doses in a short time.

ARTICLE XXXI.

Vegetable Medicinal Preparations: Some of the Causes of their Non-reliability and lack of Uniformity in Strength. An Essay read before the Eclectic Medical Society of the City of New York, October 16th, 1867. By C. T. Hart, M. D., Professor of Physiology and Pathology in the Eclectic Medical College of New York City.

With the progress of medicine new remedies are being constantly introduced. Many of these are derived from the vegetable kingdom, and within the last quarter of a century, especially, there has been much active investigation in this direction. The result shows that from plants are obtained many of our most positive, efficient and active remedial agents—such as the practitioner may rely upon to produce specific results. Much attention has likewise been paid to the mode of preparation, so as to secure their medicinal virtues in a concentrated and pleasant form. The success attending these investigations is exceedingly encouraging and satisfactory, so much so, as almost to warrant the opinion that the vegetable kingdom contains an antidote to every human disease. This consideration should stimulate every practitioner to become a close observer of the therapeutic action of medicines, to experiment with caution, and seek for new applications of agents already in use.

Unfortunately most vegetable preparations can be easily adulterated, and many of them cannot be always be relied upon and are not of uniform strength. This often happens not from positive criminality on the part of the manufacturer, but through negligence or ignorance. He obtains his crude material from any source, without reference to the history of the plant, the locality in which it was grown, the season in which it was gathered, or the mode in which it was dried. By the study of vegetable physiology it is very apparent that plants, from their structure, must necessarily be influenced by soil, climate, seasons and culture; and many familiar examples can be given showing to what a very great extent vegetables are modified and changed by these causes. The plant is a strictly organized being, in which processes of circulation, digestion, assimilation and elaboration take place as regularly as in the animal organism, and is as much dependent on surround-

ing conditions, as light, heat, moisture and inorganic substances in the soil, for its proper growth and development, as is the animal on its daily supply of food. The leaves are a true chemical apparatus into which substances, such as carbonic acid, ammonia, salts, &c., are drawn directly by absorption from the atmosphere, and by circulation through the roots, and there, under the action of sunlight and heat, undergo decomposition, the elements being re-arranged and re-combined to form various organic substances, among which are found oils, starch, sugar, gums and resins. Each plant has a definite career to run, and certain specific results to accomplish, and these never vary when the requisite conditions are complied with—when the necessary amount of light, heat, moisture and proper soil are furnished. If, on the contrary, one or more of these condition are wanting, important modifications occur in the character, quality and quantity of the organic principles elaborated. Thus the elements contained in the soil are known to exert a great influence on the chemical composition and medicinal properties of plants. Strong smelling herbs transferred to a sandy soil lose their odor. The rhododendron grown in one place is uniformly cathartic, while that from another locality is narcotic. Rhubarb will differ greatly in its purgative qualities accordingly as it is grown in England or India, or even in different localities in the same country. The same is true of opium. In France and Britain the amanita muscaria is violently poisonous, while in Kamtchatka a beverage is made from it which is used as a substitute for intoxicating drinks.

Cultivation and climate have also a marked influence. This is forcibly illustrated in the history of the common potato, the tubers of which in its native soil of South America are small and bitter, but introduced into Ireland as an article of food it has enabled that nation to advance in population from a little over a million to nearly seven millions within a century and a half. The extraordinary and extended resources which this plant furnishes are thus summed up: "Its stock, considered as a textile plant, produces in Austria a cottony flax; in Sweden, sugar is extracted from its roots; by combustion its different parts yield a very considerable quantity of potass; its apples when ripe, ferment and yield vinegar by exposure, or spirit by distillation; its tubercles, made into a pulp, are a substitute for soap in bleaching; cooked by steam, the potato is the most wholesome and nutritious, and at the same time the most economical of all vegetable aliments; by dif-

ferent manipulations it furnishes two kinds of flour, a gruel and a parenchyma, which in times of scarcity may be made into bread, or applied to increase the bulk of bread made from grain; to the invalid it furnishes both aliment and medicine; its starch is not in the least inferior to the Indian arrow-root; and Dr. Latham has shown that an extract may be prepared from its leaves and flowers which possesses properties as an anodyne remedy" By cultivation, the hard, dry covering of the almond has been converted into the soft, delicious flesh of the peach, and the sour crab apple of the forest, into the golden pippin.

It is also ascertained, from a study of vegetable physiology, that remarkable changes take place in the chemical composition and sensible properties of the organic products of plants at different stages of their development. The spicy and aromatic qualities of the unexpanded leaves of the caryophillus aromaticus are entirely lost when fully matured, and the same is true with the berries of the pimento. Colchicum, valerian, and many other plants may be cited as examples in which the active medicinal properties vary with the season. Another singular property of plants is that different parts of the same individual display very different medicinal qualities. A familiar example of this is seen in our common and much used podophyllum peltatum, the root of which is an active cathartic, the leaf poisonous, while the fruit is a pleasant esculent.

Leaving out of view the criminal adulterations and substitutions so often practised, the causes which modify the nature of plants, and render medicinal preparations made from them non-reliable and lacking uniformity, may be briefly summed up as season, soil, climate, culture, and unseasonable gathering. These operate by changing the quality and quantity of resin, oleo-resin, gums, fixed and volatile oils in which their medicinal virtues reside. By age also and drying, many plants, as the gelseminum and stillingia, lose much of their activity. In order to maintain uniformity in strength in any one preparation, it is necessary to take the foregoing facts into consideration in selecting the crude material; then by analyzing a definite quantity, say an ounce, of each lot manufactured, ascertain its exact amount of active principle. When this is done, by increasing or diminishing the quantity of menstruum, the uniform standard of strength can be maintained.

When this process is perfected and the plan honestly carried out, the practitioner will be relieved of one source of great embarrassment, and can prescribe with much more certainty and greater success.

ARTICLE XXXII.

Cerebro-Spinal Meningitis. An Essay read before the Eclectic Medical Society of the City of New York, Oct. 16, 1867. By J. M. COMINS, M. D., Professor of Obstetrics in the Eclectic Medical College in the City of New York.

SPOTTED FEVER.

The first appearance of this very formidable disease, upon this continent, was in the town of Medfield, Mass., in the year 1806. By the direction of the Massachusetts Medical Society, a report upon that epidemic was, in the year 1810, drawn up by a committee, from which I extract materials for this paper:

Between the eighth and thirteenth of March, in 1806, nine cases occurred in that town, all of them fatal. It then appeared in other parts of the State, and also of New England, subsequently extending itself to New York, Pennsylvania, Canada, northern Virginia, and finally to the southern extremity of the United States.

The committee's report, presented June 21st, 1810, traces its course for the preceding winter and spring. The summer and autumn of the year before, had been unusually healthy throughout the country, the seasons mild and beautiful, with very little rain. In 1809, it appeared sporadically in the town of Dana.

About the third of March, 1809, it visited fifteen towns, all in the county of Worcester.

It appeared in Cambridgeport and the suburbs of Boston, on the 24th of March. In May of the same year, it appeared in Springfield, Hampden county, and had not fully subsided on the second week in June.

Most of the country indicated above is inland, elevated and undulating, soil dry gravelly loam, overlying granite formation, its forest growths, oak, walnut, and chestnut.

Geologically, about half the territory above named was once the bed of an inland salt lake or sea, since which the upheavals have formed mountainous ridges in the northwestern half. It has many of the most beautiful meandering streams and ponds of fresh water upon this wide hemisphere. In Cambridgeport the disease was mostly confined to land which had been recently salt meadow and intersected by foul ditches. In Boston this disease, as also

"typhus," had occurred mostly in those parts of the town near the flats and water.

On the whole, the disease was found to have occurred epidemically in seasons differing meteorologically, and in places very various in their soil and character; no altitude being exempt, the bleak ridge, the gently rolling meadow, and the flowery dales, all alike being subject to its ravages. The invasion of the disease, says the committee, was generally sudden and violent. In its course all the functions of the body were more or less interrupted, and often some of them entirely suspended.

The subject of it was seized in the midst of his usual labor or occupation, and oftentimes struck down suddenly, almost as by a stroke by lightning. Its inception was various, as also its sequel. Most of the fatal cases terminated in from six to forty-eight hours. With regard to the fatality of the malady, the committee were unable to made any accurate statements, but say that on the first appearance of the disease in Worcester county, a very large proportion of the cases died at an early period of its affection.

After it had extended more widely, its violence seemed to diminish, and the proportion of deaths became much less. Statements differ as to the influence of age and sex in different localities, and summing up all the reports within my reach, I come to the conclusion, it had no choice of sex, but preyed upon the young, mostly between the ages of one and twenty-two, averaging about the age of eight or nine. It is not a military disease, as some have claimed, although it has existed in our camps, here and there, slightly. It is not a disease of large cities comparatively, according to statistics thus far. In France it is stated that neither *climate* or *season* has been found to exert any influence upon the disease. In Ireland and in this country by far the greater number of cases hitherto reported, have been in the first five months of the year, and by far the largest number from the 15th of Feburary to the 1st of April.

The treatment of the disease in the early history of it, was bloodletting, calomel and opium and the principal antiphlogistic remedies. Autopsies in this epidemic were not numerous, many of the physicians having the largest practice in it obtained none.

The disease under consideration, prevailed in isolated localities, in many of the middle, western and southwestern States, from 1815 to about 1840, since which time it has appeared epidemically, in more than half of the States of the Union, at various times.

In 1842 there was an epidemic of "meningitis," in Rutherford county, Tenn. Dr. Gilbert stated at a meeting of the College of Physicians of Philadelphia, April 6th, 1864, that he saw at Gettysburg in 1844, two cases, in both of which there was sudden attack by chill, great prostration of the vital powers, with "cerebro spinal complications," stupor, coma and death.

One case died in twelve, the other in sixty-four hours.

Another case, reported by the same, in Philadelphia, in 1864, in an adult male, who died in ten hours after the attack. Of the autopsy he very briefly says, that the most remarkable condition discovered, was a spotted appearance of all the serous surfaces of the chest and abdomen; no statement made whether the brain was examined.

In the autumn and following winter of 1845, it prevailed at Mount Vernon and vicinity, in southern Illinois. In Vicksburg, Miss., it prevailed from January to March in 1847. In February of the same year, it was in Bentonville and Union City, Arkansas. In January and February in 1847, and in February of 1850, it prevailed in New Orleans and vicinity. It cut down the inhabitants of Montgomery, Alabama, in the winter and spring of 1848, at which place the post-mortem appearance given was very similar to the report of the committee of 1810, with the spinal meninges highly congested. Dr. Ames reports there were in Montgomer, 250 cases out of a population of 4,000, but fails to tell the per cent of mortality. The year in which I have found the largest number of accounts of this epidemic, is 1864. During our great national struggle the South has been a sealed book to us for statistics of this kind, hence we can say nothing of it there since 1860. This scourge appeared in Palmer, Mass., February 9th, 1865, where I was then residing. The first victim was a boy eight years of age, who came home from school the day before, complaining of headache, ate his usual supper and retired to bed, no more being thought of his illness until about five o'clock in the morning, when he was attacked by vomiting, still complaining of severe pain in the back part of the head. Dr. H—— was sent for, found pulse 120 and feeble, tongue slightly coated, edges and tip red, surface of the body and extremities cool; gave him Dovers powders, calomel, &c., applied sinapisms to the feet, and left; was called again about seven, boy growing worse; did not make much change in treatment—patient became delirious and died before nine, in less than four hours from the attack.

Second. E. Sparrow, dry goods clerk, aged 21, opened and swept his store in the morning, went to his breakfast, complained of feeling not quite well, lay down, soon became delirious, hands and feet cold, tongue slightly red, pulse 130, small, and whole system became rigid and stiff. head drawn back, respiration stertorous, coma, and death in eight hours from first attack. Petechiæ covered the whole body after death, in dark purple spots about one-half inch in diameter.

Third. T. Blanchard, taken with severe chills about four o'clock, great pain in back, partial paralysis of all of the limbs, delirious, pulse 130, tongue slightly coated, severe pain in back of the head, opisthotonos quite severe, delirium, coma, death, within six hours from first attack. Hot fomentations were thoroughly applied, strong stimulants and the galvanic battery. The fourth was taken with nearly the same symptoms of the three first named, and died in about eight hours from the first attack. On the 11th I was called to see a child three years of age, about two o'clock, A. M.; found it in convulsions, very much resembling those arising from worms, and other similar irritating causes frequently found in young children, pulse very small, 150, surface cool, with very little capillary circulation, jaws firmly set, could not see the tongue, eyes partly closed and rolled up in the head, neck stiff and head drawn back. I first wrapped the entire system in hot wet cloths, packing hot bricks at the feet and sides, gave enema of strong decoction of lobelia inflata, compelling its retention, soon releasing the rigidity of the muscles, after which I gave tinc. gelseminum sufficient to control the system, followed by castor oil, and oil terebinth., which moved the bowels in about two hours, and on returning at nine A. M. found my little patient at play with her toys upon the bed. About three o'clock, P. M., was taken similarly to her first attack, continued so until death closed the scene on the third day.

Another infant, at the breast, about thirteen months old, of the same family as the two last, was taken vomiting, followed by similar spasms, pulse 150 with opisthotonos, eyes set, surface warm, for which I prescribed tinc. gelseminum to control the system, which was followed by some relief for three days. Then the mother (Irish) persistently refusing to give any more medicine, sent for the priest, who performed the usual rites belonging to their creed, expecting, as did all others, it could not live but a very short time. After the first three days it nursed daily, but

almost immediately throwing up most of its milk; continued five weeks in about the same condition, and died in convulsions. During its sickness, five physicians called to prescribe for it.

Was called in the night of the 15th, and found a boy ten years of age, rigid, cold, opisthotonos very severe, pulse 40, which was the only case where the pulse was less than normal in the twenty cases in town; his breathing was stertorous, petechiæ upon the body, distinct, but not very bright. Thinking it a hopeless case, that could not survive an hour, I made no prescription save to apply warmth. They, the Irish, for he was an Irish boy, gave him enemas of soft soap, and drenched him with red cows' urine, in which they seemed to have great faith; none but that from a *red* cow was good for anything.

He had no control over himself for a week, the natural effete waste constantly passing away. In about eight days he aroused from the comatose condition, and gradually recovered, save he is totally deaf. Another still more interesting case was that of a little girl eight years of age, taken with symptoms quite similar to those of typhoid fever, together with the whole spinal column stiff and immovable, with severe pain in the head. After a few days the whole system became very sore, and it was inflicting extreme torture to move a single joint, even a toe or finger. Walking across the floor gave her exceedingly great pain. The head was drawn back and turned facing the left, and remained so while she lived, pulse continuing eighty-five to ninety, tongue quite red, with dark sordes upon the lips and teeth. She had submaxillary abscesses upon both sides, also an abscess in one ear, all of which discharged freely. She lived in this condition eleven weeks, when death relieved her. I saw most of the cases there, watched them daily; but as the others were all quite similar, I will detail no farther upon this point. We could get no autopsy of a single case, but I have made some efforts to gain that evidence from others, who have been more fortunate than myself in that particular. "The anatomical lesions," says Villeix, "in this grave malady, have, as would be expected, been studied with the greatest care."

The principal lesions have been found in the pia mater of the brain and spinal cord, differing in different subjects. In some there were found in the cerebro-spinal membranes, nothing but injection to a greater or less degree; a limpid serosity, or, on the other hand, marked dryness, without injection; but all these cases

were from among those who had been stricken down suddenly, and in which consequently the pathological alterations had not had time to develop. In other cases there were found in the meshes of the pia mater, either a liquid which was yellowish and turbid, or thick, perfectly well formed pus. In the spinal canal the lesions are similar, and occupy likewise the pia mater. In the brain and spinal marrow, injections and partial softenings may be found. All points of the cerebellum and cerebrum are liable to these alterations. The alimentary canal also has presented a few traces of slight inflammation in quite a number of cases. One case, reported in the Boston Medical and Surgical Journal, says: "Blood fluid in the mesenteric veins. The intestines were everywhere dotted with minute extravasation of blood, both in their outer and inner surface. Similar ecchymoses were found on the bladder, in the kidneys and on the diaphragm. The mesenteric glands enlarged, the solitary glands largely developed; the lungs contained large quantities of fluid blood; in the right heart, the blood was also thin, looking like claret wine. There was no coagula in the right side." Another reported to the same journal: "Upon opening the cranium, under the cerebral arachnoid, over the upper surface of both hemispheres, was seen a whitish deposit like purulent matter; on attempting to remove the arachnoid, the pia mater came with it, the two adhering so closely as not to admit of separation; and a purulent deposit was between them. On both sides of the cerebellum was a considerable deposit of pus and lymph also. The spinal marrow, in dorsal vertebra, being exposed, considerable deposit of pus and lymph was found, without softening of the marrow." The lesions found in most of the cases reported being quite similar, varying with the multitude of complications.

Treatment.

Almost every *kind* of treatment has been restored to, all the "pathys" and "isms" have been brought forward to battle with this deadly foe, but all about alike, thus far, have failed. One claim this, another that, as a *potent remedy*, and claims for its use success; but the mortuary reports that have come under my observation show a very large per cent. of loss, about equal with all.

Dr. J. Holland, of Westfield, Mass., says: "The application of a large number of leeches to the occiput and neck, keeping up the bleeding for a length of time, gave relief for a day or two, where

they were tried. Cupping did not answer as well as leeching. *Strong* mustard poultices to the whole length of the spine gave relief to pain. Calomel was given until the gums were touched, without permanent benefit. Opium in various forms, hyosciamus and belladonna were given with good effect in allaying pain, but never in large doses. Fluid extracts of veratrum viride, in doses of from three to five drops, afforded marked relief, abating the throbbing pain in every case in which it was given. It was given every two or three hours, as the case seemed to demand. As an arterial sedative, it far excelled every other remedy I used in treatment of this disease." Dr. Goodell, of Greenwich, says: "I gave tonics, stimulants, and nourishment 'of the strongest kind,' also used powerful counter-irritants to the spine. Blisters, iodine, chloroform, ammonia, cupping, &c., &c. To one boy 13 years old I gave one pint of whisky in two hours, all with no decidedly beneficial effect." Dr. W. G. Breck, of Springfield, found oil of turpentine and tincture veratrum viride of great service. Dr. M. Calkins, of Springfield, used cold applications to the back of the head and spine, with hot pediluvia and copius draughts of tepid water. Dr. C. Jordan, of South Reading, says, two cases were treated by depletion, with counter-irritation to the spinal column and extremities. Both fatal. I am fully satisfied that the best treatment in this disease is, first a brisk cathartic, or stimulating enema, warm bath or hot, wet blankets, kept hot by external applications of bricks or stones, with veratrum viride sufficient to control the accelerated circulation, together with, or alternate with, tincture gelseminum to the fullest extent the patient can bear safely. The hot bath is a powerful agent to prevent congestion and keep up circulation; will almost invariably relieve petechia, or congestion in the capillary vessels. I believe nourishment of any kind in shape of food to be *extremely* detrimental, only adding to the irritability of the case. If the case is greatly debilitated, use strong stimulants, both by stomach and enema: chloroform one dram, simple syrup two drams, mix, is one of the quickest diffusible stimulants that can be taken into the stomach, and is particularly called for in a case of this kind.

In a report made to the Boston Medical Society in 1866, of which L. Parks was chairman, it is stated that in 278 cases, 170 were fatal, 108 recovered. The percentage of fatal cases a little more than 61. The percentage of recovery a little less than thirty-nine.

The number of cases in Palmer was 20; fatal, 12; recovered 8. Percentage of recovery 33⅓; fatal 66⅔.

I have found, on careful examination of about one hundred cases, both by personal observation and the assistance of others, that about ninety-five per cent of the cases in New England were of strumous diathesis.

The father of the first case taken in Palmer was at the time laboring under, and has since died, of phthisis pulmonalis. The father and one sister, of the second, died several years since of the same disease. The father of the third also. Several of the family on the maternal side of the house, of the fourth, and so on. I might enumerate *ad infinitum*. Only one case, E. Sparrow, spoken of above, who had black eyes and hair; and one case, T. Blanchard, who was at all lymphatic. The individuals attacked were of fair blond complexion, light hair and eyes, hair fine and soft, soft muscular fibre and rather small development, very good development of the intellectual faculties phrenologically speaking, small cerebellum, and rather small chest. Those cases were so well marked that I pointed out several individuals, as being organically constituted as fit subjects for it, several of whom were thereafter stricken down by it. This class of individuals, seem to be predisposed, fitted organically to imbibe the poison, or, with not vital force or tenacity of life enough to resist it, to battle with the conflicting elements with which we are surrounded, and keep an equilibrium in the great laboratory of life.

There is much speculation as to the cause of this disease, many calling it "typhoid," and "malignant typhoid," and attributing it to malarial influences. This I am fully satisfied cannot be, as some of its haunts where it has been the most fatal, are far remote from any malaria at any season of the year; and then again, it mostly prevails when malaria is locked to the bosom of mother earth, by the frosts of winter. I consider it a specific disease of great malignancy, in a majority of cases differing in kind from almost all others, originating from a concurrence of causes in the atmosphere; those which unite certain elements, forming certain other chemical elements, the cohesion of which, when inhaled, and absorbed is very potent—so much so, that when the *predisposed* absorb a sufficient amount of it, he is stricken down, as by electricity. I doubt not but the primary impression of this poison is made upon the vital constitutents of the blood, in de-vitalizing the molecules of which that fluid is composed, and by this waste of

vitality in the blood every particle of which our bodies are com posed, begins to flag and yield, for want of its natural stimuli; which is found only in that fluid, as possessing the properties of stimulation, recuperation, and repair.

This waste of vitality soon develops new phenomena, the fluids of the body soon run into putrescency; the blood becomes dark, and hence petechia, from extravasation of blood into the *cutis vera*, hence, venous congestion.

With these the brain and nerve system seem to suffer, being as the name implies, an inflammation on the membranes of the brain and spinal cord, not by any direct influence of the poison made upon the nervous centres through the vascular current, but the nerves are robbed of their nervous fluid, and are no longer capable of receiving impressions made upon them; and the mind fails to take cognizance of things presented to it, and anemia of the brain is the pathological condition. It has not been considered a contagious disease, by any writers upon the subject that I have seen.

ARTICLE XXXIII.

Vaccination. An Essay read before the Eclectic Medical Society of the City of New York, Nov. 19, 1867. By E. WHITNEY, M. D.

In presenting this subject at the present time, in the absence of any excitement, or any pressing necessity to call out discussion, I am aware the best effort may appear tame and uninteresting, while so many other subjects of special interest are before us, claiming thorough investigation and deliberate action. Yet its importance seems to me sufficient to secure some attention under any circumstances, and elicit a general expression of views, which may lead to closer observation and care in the selection of lymph for the more judicious practice of vaccination.

Though there be at present no special exigency demanding its presentation, it is, nevertheless, equally as important to the community, when universal complaint is being made of the intrusion of vaccinators into the public schools, and the diffusion of scrofula and other forms of disease through the taint and impurity of the virus there used; as when on the approach of an epidemic of variola, the sensitiveness of community is greatly intensified and demanding immediate action; and when, too, the inquiry invariably arises whether there be any means by which the contagion can be stayed, isolated and confined to some particular locality.

It is true that under such circumstances the general interest is pervading and all-absorbing, for the alarm it occasions, the pervading sense of insecurity and the fear of exposure, all tend to rouse the mind and stimulate to activity and effort to guard against threatened danger and ward off a fatal disease before it shall gain a permanent foothold in a populous community. In this all feel concerned, and are at once aroused to the importance of due consideration of the subject, feeling the necessity of seeking a place of safety, or at least adopting the best means of security and protection against the invading foe.

This is ever the case whenever variola makes its appearance in an epidemic or malignant form, as it often has done in its prevalence during a few years past. The news of its irruption spreads in every direction, carrying with it the fearful impression that the

gentle breeze, or some unlucky passenger on board the steamboat or railway car may bring its contagion into our midst. A feverish excitement prevails; the people become alarmed; boards of health are aroused and speedily issue their proclamation requesting re-vaccination; legislatures feeling the pressure and the necessity of some action, take up the subject, investigate, discuss, and, perhaps, suggest as the result of their profound deliberations, "compulsory vaccination." Yet, in all this, the more important vital question, why is not variola banished from among us? is left comparatively untouched and unanswered. The error, it is affirmed, is found in the unwillingness of the people to adopt the process of vaccination, while the cause of this unwillingness is carefully concealed and kept as closely as practicable within the "arena" of the profession. This excited and ephemeral action of the constituted authorities might assume some practical importance, or at least lead to some favorable result, were the best mode of procedure for obtaining pure and reliable lymph exhibited and presented as a part of the arrangement and regular course to be pursued in carrying out the compulsory process. But while action on this subject is delayed, the disease subsides; the interest dies out, and the evil remains unabated.

To go into the minutiæ and present an exhaustive argument on this subject would require more time than can be given at present. Only a few, therefore, of the more important facts worthy of special consideration can be noticed on this occasion.

From a former report on this subject, which was drawn up with much care during the existence of our late civil war, and intended for publication, but unused, it will appear that the people have cause for distrust as to the genuineness and protective power of vaccinations which have been performed during some years past. In the army, in the navy, and in various sections of the country, variola not only occurred, but in some instances even became quite prevalent in vaccinated subjects. The paper referred to remaining at this date unpublished, and here cited, presents views and facts coincident with those exhibited in recent reports on the other side of the Atlantic, and is presented in the following language:

There is, notwithstanding all argument to the contrary, an appropriate time for general vaccination. For this none can be more favorable than the present, when, if reports be reliable, there are sporadic cases of variola occurring in some sections, and

especially, as is always the case, to some extent in this and other large cities. From these common centers, it may at any time, by intercommunication, spread over the country. The present time is propitious on account of the coolness of the weather. It is desirable to select the cooler part of the year for many obvious reasons. It is unquestionably the best for securing good, healthful vaccine virus. It can now be easily obtained direct and fresh from the kine. This is a very important consideration, and should not be overlooked; for there is the clearest and fullest evidence that this vaccine lymph, or crust from the kine, furnishes the best, safest and most certain protection and immunity from the contagion of small-pox.

It is, however, a lamentable fact that much is improperly collected from other unworthy and questionable sources, and sold under the name of vaccine virus, which is impure and comparatively worthless. Vaccination of this questionable character does, no doubt, find its way into common use in this city, and even in the country, as most of that used in the country is obtained here. Hence the general objection to vaccination on account of the vitiated character of the virus, through which, it is believed, various forms of scrofula and other constitutional or malignant diseases are too frequently introduced into families, who, prior to this process, were entirely free from such taint or development. Hence, too, the frequent failure and the great want of confidence among the people in it as a preventive of small-pox. Impure and worthless matter does generally, when used, produce a very bad sore, and often inflicts injuries in a variety of ways, without adding or furnishing to the system one particle of protection.

Cases of unmitigated variola are frequently occurring in vaccinated subjects, indicating a radical defect in the performance of the operation, and consequently in the impression intended to be conveyed and made decidedly upon the system, by the ingrafted disease, "vaccinia." From recent developments, a large proportion of vaccinations, for the twenty-five years last past, may be considered spurious, and may, should the disease variola spread over the country in an epidemic form, prove ineffectual and unprotective, to the sad disappointment of vast numbers, who now think themselves perfectly safe.

Of this the evidence is constantly forced upon us, despite of all efforts to conceal it. Such is the nature and character of the testi-

mony, that we need select a few items out of the multitude before us, which go to show that these objections are not altogether untenable. It is not many years since a gentleman took the disease small-pox without being exposed in any way to his knowledge, and communicated it to all his family save one. Two out of four cases were genuine small-pox. The others were varioloid. All of these had been previously vaccinated, and had every reason to believe they were perfectly secure and safe. In the case of the two younger, it was supposed they were impervious to the contagion, as they had been revaccinated only a few months before; one took the disease and had the genuine small-pox, while the other, taking the disease from the same source, had varioloid.

In another family, four out of five had the disease. Three of these were well defined, and decided cases of small-pox. All but one had been vaccinated, and adjudged to be perfectly safe and certainly protected against contagion.

In another there were three, all of which were decided and severe cases of the genuine disease. These were supposed thoroughly protected by vaccination, and at least shielded for the time from any impression of contagion, but like many others were sadly mistaken.

Cases of revaccination in our public schools show a record, so far as the facts are known to us, but little if any more favorable.

These are not solitary cases, nor were they among the dregs of society; but occurred in the higher works of life. Many similar cases might be cited, all going to show the deterioration and worthless character of the vaccine virus that has been and still may be in use, for aught that is known to the contrary.

Had these families been properly vaccinated with pure fresh virus, direct from the kine, the acknowledged source of the kine-pox, they would in all probability have escaped the odium of this disease. So frequently, however, are such cases occurring in subjects who have been vaccinated and again revaccinated, not only in the army and navy, and in some sections of our country recently suffering from this fearful malady, but even in our midst, and under our own observation, that it becomes exceedingly important for us all to enquire whether we are protected, or not. A mistake on this point may be fatal.

In all those cases where vaccination was improperly performed by the use of an impure, tainted, or otherwise vitiated virus—or from any other cause rendering the vaccinia spurious and unpro-

tective, it would be the safer and the better course for such, if they would render their protection reliable, to be properly revaccinated from pure fresh virus derived direct through the usual process from the kine. This we know to be reliable aud permanent in its protective power. But how far its transmission from one person to another may be carried without deterioration, and detriment, we will not pretend to say, but let facts decide.

"An eminent surgeon of Naples," says the London Lancet. "M. Palasciano, introduced and carried out a plan of conveying the vaccine virus from heifer to heifer, so as constantly to have a supply of lymph direct from the cow. At the congress of Lyons, two years ago, M. Palasciano brought these facts before the meeting, and the innovation was looked upon as a feature of considerable interest. At that period, Dr. Lanoix, a medical man practising in Paris, thought that, for various reasons, the capital of France should have facilities for vaccinating from the cow, in preference to the usual modes of conveying children's virus by glasses, points, tubes, or from arm to arm. In fact it was thought an advantage that the vaccine lymph should not pass through the human organization, as the lymph would thus be fresher, and the taint which certain children might attach to it would be avoided. Dr. Lanoix communicated his plan to M. Depanl, and to the Director General of the Paris hospitals, M. Husson. Both these high functionaries encouraged the project; and Dr. Lanoix proceeded to Naples to study under M. Palasciano animal vaccination."

"M. Husson states that in the hospitals of Paris in fifteen months, 9,316 vaccinations and revaccinations were performed by means of Dr. Lanoix's heifers, led into the various hospitals. Of these 1,392 were men; 2,457 women, and 5,449 children. The operations were, as usually the case, successful in a very limited number of *revaccinations*, varying from 16 to 17 per cent.; with children, however, the successful cases were about 50 per cent. M. Depaul's experiments extended from the 12th of April to the end of December 1866."

Of the interesting report on this subject made to the French academy of medicine, the editor of the London Lancet says: "It is very long, extremely minute, of great lucidity, and is decidedly in favor of animal vaccination." One remarkable fact appears further on in the body of this report, worthy the notice and consideration of every physician and surgeon. It is presented in the following words: "From the trials carefully made, it becomes

evident that syphilis is not transmissible to the bovine specie." In confirmation of this, reference may be made to the report of the committee at Florence. Drs. Ricordi and Dell'Acqua, who were appointed to ascertain the fact, and satisfactorily settle the question, whether the disease termed syphilis was transmissible to the kine, or not, after several months labor and a thorough investigation of the whole subject, give their answer emphatically in the negative. "Not less than twenty-one distinct experiments were made, and the final result was, as stated above, that the noisome disease in question is not transmissible to animals of the bovine species.

Hence it may be inferred that the vaccine virus taken direct and fresh from the kine is perfectly free from this taint and other forms of scrofula with which it coalesces. It is also evident from their reports that the experiments made have fully established the fact, that the best course for the safety and protection of community, is to return to Dr. Jenner's original proposition—to the use of pure fresh virus from the kine only, which he affirmed to be perfectly reliable and permanent in its protective power.

The Manhattan Dispensary, in this city, adopted this course at its commencement, and has received the most gratifying assurance that its extensive practice in this respect gives perfect satisfaction to its patrons, for while it is prompt and decisive in its action, and permanent in the impression it makes upon the system, it is absolutely certain that no syphilis, scrofula, nor other human taint or impurity, can possibly be transmitted through the use of lymph thus obtained.

In many instances, no doubt, disease has been communicated to those who were previously free from any taint, and always appeared to the most scrutinizing observer to be in the enjoyment of perfect health. Cases not unfrequently occur in practice where the arm becomes badly swollen, highly inflamed, and exceedingly distressing, showing a malignant character utterly unlike the normal condition of a vaccine sore. How can this distressing result be accounted for, if it be not from the transmission of some unexpected malignant disease, which in its development becomes more violent and controlling than the vaccinia; thus rendering its influence upon the system unprotective and useless. Many have had occassion to deplore this result, and have earnestly sought some practicable way to avoid it without changing the process of procuring the lymph from the crust. But here lies the evil which ought to be

corrected, to prevent disastrous results in practice. To mar the beauty and undermine the constitution of a healthful child, is no trifling error in the process of vaccination; yet from tainted and impure virus, this result does sometimes occur. The evil is quite too prevalent and cannot be ignored; for the facts are so numerous and appaling that no apology can be offered exculpating the criminality of those who persist in this course; extracting and using humanized and tainted lymph, taken, as it often is, from the arm of children having a decidedly scrofulous parentage, for the purpose of extracting and perpetuating vaccinations. Under such circumstances, how can the result be otherwise than pernicious? Besides, the practice of puncturing the vesicles in the sore on the arm is generally admitted to be decidedly injurious, and liable to render the vaccinia spurious and unprotective. Hence a two-fold result—the transmission of disease, and the loss of protective power.

Cases of this kind are multiplying and becoming so serious as to create much uneasiness and alarm respecting the healthful physical development of vaccinated children, and their protection and freedom from wasting disease. A few cases of well known and well established facts must suffice.

In one family, two children were vaccinated at the same time—one from virus taken from the kine, the other from virus taken from the arm of another child, apparently healthy. The former passed through the usual stages, exhibiting in each the well marked and normal character and condition of a healthful vaccination. The impression in this case made upon the system by the engrafted disease, vaccinia, was very intense and decided for two or three days, and thus gradually passed off, leaving the system healthful and vigorous, with the clearest and best possible evidence of reliable protection against the contagion of variola.

The latter was not so fortunate; the vaccination speedily developed an abnormal condition, and presented an inflamed and ugly appearance, while the arm became exceedingly sensitive, painful and considerably swollen, rendering medical treatment for its alleviation and cure indispensable. The virus had received some unexpected and peculiar taint in passing through the human organism, which had in this instance taken the lead, and primarily developed itself, rendering the vaccinia secondary and comparatively inoperative, besides inflicting upon the child untold suffering, and causing it parents days and weeks and months of anxious

care. The former passed through the process and regained its health perfectly in about two weeks. The latter, with untiring parental care and skillful medical treatment, passed through the process and regained its health partially, in about twelve months. These were children of the same parents, equally healthy and vigorous prior to vaccination, but now how different—the hopes of one are bright and promising—the hopes of the other are precarious, if not forever blighted.

During the prevalence of variola in this city a few years since, several instances occurred in which the comparative value of vaccine virus from the kine, and that also from the arm was pretty fairly tested as to their protective power. It was usually the case when the disease appeared in a family consisting of various members of different ages, that the first thing called for was the vaccination of all the others, from the oldest to the youngest, to limit if possible the contagion to the one attacked, and prevent it from taking effect and spreading among those exposed to its influence. Pure virus from the kine was often sought, and even by some demanded. This, when it could be obtained and used in season effectually limited the disease to the one affected. No other member vaccinated with pure, fresh virus from the kine either took the disease, or showed any signs of being in the least affected by the contagion. But on the contrary, when vaccinated with virus from the arm, the result was not so favorable; however pure and fresh the lymph, it did not stop the spread of the disease; for those thus vaccinated generally took the disease and had the modified form, termed varioloid, in greater or less severity. The protective power of virus from the kine, when it could be had at the proper time, proved effectual; while that from the arm, however fresh, proved in many instances only partial.

Among the numerous instances of the transmission of disease which might be cited, illustrative of the general result, in ordinary practice, from the use of virus taken from the arm, at our dispensaries, where much every season is collected and furnished for general use in this city and vicinity, is the following: In a family of six children, each of whom was vaccinated in early infancy, three passed through the process and speedily recovered under very favorable circumstances. The engrafted disease was free from any apparent complication, and, of course, gave reliable and permanent protection. The other three, though vaccinated in the same manner by the same physician, were very unfortunate, and

suffered for several months in consequence of this taint which had been attached to the virus. The arm in each of these three cases manifested an unnatural appearance for a vaccine sore, each exhibiting different degrees of malignancy, and showing conclusively that the vaccine was complicated with some noisome and contagious disease, which had taken effect primarily in the development of the pustule and the subsequent inflammation and swelling that ensued. These children were all vaccinated at different periods, with virus taken in a similar manner, from the arms of other children supposed to be healthy.

The history of vaccination in this family, were it drawn out in detail, and the peculiar phase of the disease in each case presented, would give a very clear idea of the result of a large class of cases now too frequently occurring in general practice.

Another case worthy of special record occurred not long ago in the practice of a noted physician. A very beautiful and healthful child, whose parents also were, so far as known, perfectly healthful and vigorous, was vaccinated after much delay in consequence of objections to the general character of vaccine virus and the unhappy effects too frequently following its use. The virus used in this case was supposed, and even affirmed to be, perfectly pure, being taken in the ordinary course of vaccination from the arm of another patient. Of its purity there seems to have been no doubt. The operation was performed as usual upon the arm, and the development of the disease, vaccinia, closely watched. The puncture soon showed signs of activity—looked red and inflamed; the pustule soon appeared in its regular form, and exhibited nothing unusual in its early stage. But in its progress the pearl-colored elevation of the cuticle gradually increased in magnitude, deepened in color, and became a very dark livid red, which was supposed to arise from the purity and peculiar virtue of the virus.

On the seventh day it was regarded healthful, and lymph was then freely taken. Two days after, it being considered still in a healthful condition, a large quantity of lymph was again taken from the arm, as the sore seemed to afford a pure, colorless fluid in great abundance. The activity of the virus at this time showed no signs of abating, but on the contrary, increased severity, involving the arm and ultimately the whole system.

About the twelfth day the arm became much swollen and painful. The pustule took the form and presented the characteristics

of a malignant ulcer, gradually increasing in size and extending its depressing and destructive influence till the more vital organs became seriously affected. This condition continued for many days, notwithstanding the prompt and persevering efforts for relief, which finally came after the appearance of a distressing eruption that gradually spread over the entire surface of the body, highly inflamed and aggravated, and still remains in a subdued latent form, to mar the beauty and impair the health of the patient.

The tumefied ulcer on the arm remained open, and discharged a thin watery fluid for months, and was ultimately healed by the persevering attention of the physician, leaving behind an ugly disease whose latent power when aroused and rendered active by some direct and impelling cause, may yet prove unmanageable and fatal. Without further detail, let us inquire was the virus in this case pure, as affirmed prior to its use? And was that taken from the arm of this patient fit for the purpose of perpetuating vaccinations?

Cases might be multiplied indefinitely; the fatal effects of vaccinations from impure virus recited, and the address of physicians and patients—the age and dates—all given, were it deemed necessary to proceed further than to call attention to this important subject. The facts, however, are well known to the profession. Let a mere allusion to the same suffice. The great question for us to consider and determine is, can these bad effects be avoided? And if so, shall the means necessary be adopted and the reform made?

In conclusion we will only add that whatever plan, ordinance or legislation may be made or had on this subject, it is vastly important that SUCH should cover the whole ground, and place the responsibility of spurious, vitiated and fatal vaccination where it properly belongs.

ARTICLE XXXIV.

Singular Case of Retained Foetus. Read before the Eclectic Medical Society of the City of New York, Dec. 18th, 1867. By J. M. COMINS, M. D., Professor of Obstetrics in the Eclectic Medical College of the City of New York.

A few years since, Mr. W——, a well-to-do farmer, called me to visit his wife, as speedily as possible, for, said he, "I think she is dying." I hastened to their residence, about two miles from my office, with all possible dispatch, found Mrs. W. in bed, presenting all the symptoms of extreme loss of blood, complaining of syncope, floating objects before the vision, pulse one hundred and twenty—fine and weak, with extreme colliquative sweat.

Without any preliminaries, I at once made a digital examination per vaginam, found the os uteri dilated about one inch and a half, firm and unyielding; within, a dead foetus with head presentation, no abnormal growths, or deformities, and no uterine action whatever. On removing my hand, my fingers were covered with a murky fluid, resembling in color the strong decoction of coffee, with thick sediment. I quickly inquired into the history of the case, after administering about two ounces of brandy, in form of hot sling, and received in reply, as soon as she could recite it in her very faint condition:" I am thirty-six years of age, have borne four living children, have never had any trouble in gestation or parturition, always have convalesced rapidly. I have always been prompt on time. I have a good, healthy, and strong system. Six weeks ago to-day, my time was up for my confinement. Feeling exceedingly well, I went into the field to drop corn for Mr. W. to plant, thinking I should have timely warning of the expected event. I spent a large portion of the day thus employed without exciting any unpleasant symptoms. I rested well the following night, but felt some tired the following morning. I took my easy chair to attend to some light sewing, when about ten o'clock the "waters" discharged, without the least pain. I was so easy, and free from all other signs of labor, I thought I would would wait until Mr. W. came home to dinner before sending for a physician. At noon still feeling so well, continued to wait. After retiring to bed that night, Mr. W. and myself both distinctly heard the moan of a child twice, and a few seconds after,

I felt a terrible struggle of the child in utero. I have never felt the slightest motion since, have been usually well; attended to my household duties as usual, have never had any color of blood passing away, but after the third day following that terrible struggle, an umber-colored discharge has been constant but not profuse. The milk filled my breast as usual in former labors, which I was obliged to remove occasionally; but it has gradually dried up, until now I have none. For the last few days I have been feeling very languid. This morning I was taken sick at the stomach, for the first time, and have been very faint for the last two or three hours, but have never felt any efforts of the uterus to expel its contents. Feeling I had no time to lose I applied hot applications to the whole surface of the bowels, hot pediluvium, a strong stimulating enema per rectum, a cold wet cloth to the vulva and over the fundus of uterus for an instant, a full dose of ergot (and external manipulation) to induce contraction of uterus, but all to no purpose; thus I used up several hours, feeding my patient on brandy, and trying the various things at my command. The brandy having stimulated the patient to quite a comfortable condition, apparently, my alarm for her safety became less. In the meantime I sent for an "old school M. D.," there bring no Eclectic near at hand, a man of good abilities and much experience, who said he had never seen such a case before; not giving me any light upon the subject, pretending to be in a *great hurry*, he soon left me to do as best I could. I could see but one way of delivery, and that by ovariotomy, and even that dubious, from the size of the os uteri; still remaining about an inch and a half dilated, although belladonna had been kept in contact for several hours.

I drove rapidly to town; held conversation with another M. D., who corroborated my views in the case. I took my instruments and two or three large sponge tents, and returned to my patient, finding her as I left her. I now introduced a sponge tent into the os uteri, and seated myself to await the result. In about one half hour, I applied a still larger tent, and at the expiration of the second half hour thought I might be able to use the instruments carefully. Placing my patient in the right position for operation, I introduced a large gum catheter past the foetus high up into fundus of the uterus, and injected about a quart of cold water with an ordinary Davidson's syringe, for the purpose of rincing out the uterus and exciting a little uterine contraction if possible,

and within one half minute from the time I removed the catheter two slight uterine contractions took place, and the fœtus was expelled—a singular decomposing mass, with no other odor than a peculiar sweetish, honey-like smell, which was also very distinct in the breath of the patient. The walls and viscera of the abdomen of the fœtus had all been decomposed or absorbed; part of the liver and lungs also; the trachea and one humerus were laid bare. All of the soft parts had lost their respective identity, and assuming a soft fatty mass very much resembling soft cheese, of a dark peach-blow color, save the integument, which was of a reddish brown or copper color, tender like the rest of the mass; the bones very elastic and easily disarticulated; the placenta entirely gone, also the decidua.

How could that fœtus have laid there six weeks decomposing or being absorbed without affecting the mother more? In ordinary cases a dead fœtus or retained placenta produces an intolerable fetor in three or four days, placing the life of the patient in eminent peril from pyemia, uterine irritation and inflammation, peritonitis and puerperal fever.

This case had no unfavorable symptoms of that kind, convalescing rapidly without any local discharge of blood, only discharging from the uterus for a few days that same muddy brown fluid that had passed for six weeks, less daily until it ceased entirely. Mrs. W. avers she could taste that same sweet smell in all the food she ate for a month, but had never tasted it before delivery. Why that fœtus thus retained so long?

ARTICLE XXXV.

Cancer—Its Pathology and Treatment, with Illustrations. Read before the New York State Eclectic Medical Society, January, 1868. By ROBERT S. NEWTON, M. D., Professor of Surgery in the Eclectic Medical College of the City of New York.

In 1843 I began to investigate the subject of cancer, with a view of ascertaining its curability, and found, upon examining the various written authorities, both European and American, for over three hundred years, that there were only four European authors that admitted, unqualifiedly, the curability of cancer, and of the American authors, not one had laid down the principles of cure, on the pathology of its being a curable disease. Nearly all the authors of both continents regarded cancer as primarily a constitutional disease, and the local development as the evidence of the same. And after examining the reports of over six hundred surgeons, giving the result of three thousand cases treated by them, we found that they had not cured a single case. Every one of these surgeons believed that cancer was a constitutional disease, and as such incurable.

I was educated in this same school of medicine, and had been fully indoctrinated with this belief; but reflection, and the actual necessity of doing something to relieve the many thousands who were suffering with cancer, was an incentive to begin a course of experimental investigations. At that time I established an institution for the special treatment of cancer in all its forms, tumors of every kind, all classes of ulcers, the various diseases of the bones, fistulous diseases, hemorrhoidal diseases, as well as the whole class of chronic diseases. This institution was at once filled with persons suffering with the above diseases, from all parts of the United States. This enabled me to discover the fact that cancer is pre-eminently a local disease, and never is it constitutional in the beginning. The several years I continued these investigations gave me an opportunity to discover a new and reliable treatment, which will in every case cure cancer if properly used, and under proper circumstances. This disease is just as curable as any other, with the right kind of treatment. These various investigations also enabled me to make valuable discov-

eries in regard to a more successful treatment of the other diseases referred to. In fact, so complete was the success, that it laid the foundation of an entire new practice in all these diseases—fistula, diseases of the bones, tumors, ulcers, hemorrhoids—and the adopting of these principles ever since has enabled me to cure these diseases in all cases. I have examined, personally, over six hundred cases of cancer.

Cases which I pronounced curable have always been restored. This extensive experience has enabled me to determine, upon sight, whether a case has gone too far to be cured or not.

In 1846 I published, in the "Western Medical News and Cancer Journal," the following doctrine, since which time I am daily receiving confirmatory evidence of the truths first promulgated by any surgeon:

"Believing as we do that cancer is primarily a local disease, justifies the teaching and practice of local applications for its treatment. If it was a constitutional disease, it could be detected in the circulation before ulceration, as well as after this change had taken place. The very best microscopists have failed in every instance to detect cancer in the circulation before softening, while they have found it in the blood after this change. Can a stronger evidence than this be wanted to prove the position taken? The substance of cancer texture is of *zoophyte cysts. Cell., blastema, monad* we regarded an independent organization, to be the origin and continuation of cancer, yet it subsists upon the system. It has its own sensibility, but does not impart to it the sensorium of the person diseased by this peculiar organization. It is generally found in parts with but little vitality, or where a disorganization or dissolution had been produced by some violent action, but not so rapid as to prevent its recomposition in another animalized form, which will take place under certain circumstances, when *heat* and *moisture* are present. By this process decomposition or partial change in a part produced by outward causes takes place, and a new product, a living organization, is the result, and by the aid of chemical action.

The philosophy of the present day is that every animal and plant "must have a parent and progenitors ascending to the creation;" but this is not true, as illustrated by the hydatid, which "affords the strongest evidence that the lowest orders may be spontaneously produced," and that they afterwards acquire powers of propagating their species. For it would be absurd to suppose

that the eggs or seeds of hydatids were conveyed through the medium of the circulation to the parts where they are produced, but like cancers they seem to be the effects of an injury to the organization where they are found. When one of these beings is formed, a progeny quickly appears, and there is no limit to the family.

As long as cancer retains its life and health, there is no ulceration; but as soon as any portion dies, softening takes place, and then it is followed by all the attendants of suppuration. Cancer originates, like all other incipient vital organizations, in a point. Its substance is cysts containing a fluid, and evincing a contractile power like hydatids, an acknowledged organization. It has a tendency to increase its animality, and assume the hydatid form and character; like hydatids, it arises *spontaneously* and *from accident*, and may be destroyed by proper means.

I have briefly stated my opinion of cancer, and will now refer to some of the causes of failure in its treatment. So far as the simple removal of the part affected is concerned, local applications and the knife hold the same relation; for if they act only upon the immediate part, neither will cure, as thousands of failures have demonstrated. The knife fails because it does not reach all the cancer formation; the same is true of the most if not all local applications, regardless of classes, when the simple removal of the cancer is the object. I may then be asked, in this view of the case, if I regard the disease curable. I answer, yes, and will give my reasons for the same.

The object of all kinds of treatment is to remove all the diseased structure; but a diseased action of the parts precedes and causes the morbid structure, which exists in a germinal stage and yet shows no pathological change. This has and will render the old treatment unavailing. This being the case, a cure can only be produced by using such remedies as will destroy both the pathological structure and the pathological action. The knife will not do this, or will arsenic, lead, antimony, copper, mercury, nitrates, sulphates, or gold and silver, in their chemical combinations, nor the whole class of vegetable costics. All of these agents will produce death of the parts simply, but they will not change the pathological action of the surrounding structure. By referring to the various works on cancer, especially Cooper's Surgical Dictionary, it will be seen that more or less of these agents have been

used, not only without benefit, but with decided injury, to the system, in consequence of their poisonous nature.

Without regard to the means resorted to for simply removing the pathological condition of the parts, I know that the various preparations of zinc and iron, first employed by me, are the only agents which will change the pathological action, and that, too, without producing any injurious effect on the general system. My extensive observations fully warrant the reiteration of these views. While I do not pronounce these discoveries specifics in the cure of cancer, I do say that they have and will produce results that cannot be obtained by any other means. I have for more than twenty-five years used them successfully, and nothwithstanding I have often used the knife to remove the mass of the disease, I have never relied upon that as a curative agent, but universally subjected the base of the structure to applications of medicine. My reason for presenting this subject again to the Eclectic medical profession, is that this plan of treatment is coming into general use in the various hospitals of Europe as well as in the hospitals in New York city, and having been the first surgeon either in this or any other country to recommend and teach this peculiar treatment, I am not willing to rest quiet, and let the old school take and adopt my discovery, without our own school of medicine being fully informed of the fact. They are daily introducing into their new books, teachings and practice, the results of the labors of our school, without, in only a few instances, giving credit where it is due. While I am willing the human family should be benefited by such a course, I am not willing that they shall do so without the profession knowing that we as a school should have the credit for making this great discovery.

Having thus briefly called your attention to my views upon this subject, I will now bring before you the notes of a few cases to illustrate what I have said. The first is a case of fungus hæmatodes of the most remarkable character. As early as March, 1853, I first presented this case to my clinical class in Newton's Clinical Institute in Cincinnati. I make the following extract from the clinical record of that date giving a description of its appearance as well as its measurement:

"EXTRAORDINARY ENCEPHALOID TUMOR.*

"On November 2d, 1858, there was exhibited to the medical class at Newton's Clinical Institute a cure of fungus hæmatodes

* Eclectic Medical Journal, Cincinnati, Ohio, 1853, page 188.

which, for size, locality and peculiarities, is scarcely to be equaled in the annals of medicine. The subject, John Herrington, aged 10 years, was first presented on March 22d, 1853. The following extract from the published report of that date, gives the history, size and appearance of the tumor at that time:

"'FUNGUS HÆMATODES.

"'John Herrington aged 4½ years, is a little boy laboring under fungus hæmatodes of the left shoulder and arm. When ten weeks old a little red spot appeared upon the shoulder and has continued to increase ever since. Two years since he had slight hemorrhage —it has since increased in frequency. A few days ago, he bled two quarts at one time. It embraces the arm clear below, with the whole of the shoulder joint, and has contracted the chest upon the left side. The blood-vessels are very much engorged. It measures 19 inches across from the neck and 22 inches in circumference. Its largest circumference is 24 inches. He has grown more for the last year than for two years previous. There has been no hemorrhage for a week.'

"In November, 1859, I again presented the boy to the clinical class having had him under observation the most of the time since 1853. The following is the record extracted from the clinical report of 1858:*

"'The present appearance, November, 1858, of the tumor and parts involved are finely represented in the engraving, plate No. one. It now measures around its neck (1 to 2) 25½ inches, from A to B 29½ inches, from C to D 24, and from A to C 28 inches. The whole shoulder, the arm extending below the elbow, and the left half of the chest are all covered by this huge cancerous growth. The sternum is pressed backward and the left lung much compressed; the spine is curved and the shoulder and elbow joints are disarticulated; the blood vessels are much engorged and tortuous. The tumor is spongy to the touch, and on the outer extremity at C is a round protuberance, which at times is the seat of hemorrhage. Three hemorrhages have occurred within the last month—one amounting to over a quart. Strange to say, until recently, the boy has been active, lively and playful, remaining about with his mates, apparently suffering no great inconvenience. Lately, however, he complains of pains in his knees and stomach, and obtains relief only when hemorrhage occurs.'"

* Eclectic Medical Journal, Cincinnati, Ohio, 1859, page 70.

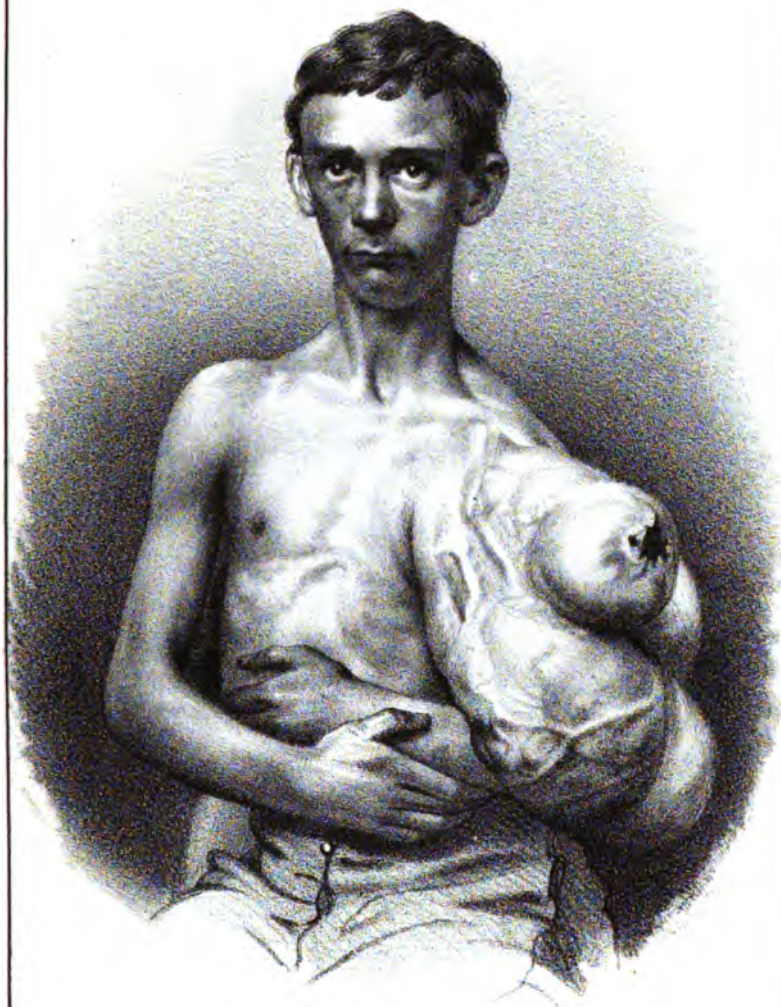
Plate 1.

Encephaloid Tumor.

Plate 2

Encephaloid Tumor.

Plate 3.



Encephaloid Tumor.

Plate 4.

Encephaloid Cancer of the Eye.

Plate 5.

After the Cure.

Plate 6.

Cancer of the Breast cured.

By comparing the relative measurements at the two dates, the exact growth of the tumor during that time will be ascertained.

Plate one represents him in November, 1858. Plates two and three show the appearance of the tumor in 1867. A photograph of which with notes of his condition was furnished me in Novemvember, 1867, by O. E. Newton, M. D., of Cincinnati, where the boy still lives.

He was born August 9th, 1849. His father died from inflammation of the lungs; his mother with hepatic disease. Has two sisters, one sixteen, the other eight years old. The eldest has enlargement of the glands of the neck. The boy is now in his nineteenth year, and is very active in his habits. He occasionally suffers from intermittent fever. About two months since he had a violent attack of hemorrhage.

This is one of the most remarkable cases on record. I have known him personally for many years, and have watched his case with much interest, but could never obtain the consent of his parents to allow him to be operated on. They would not even allow any local applications, except styptics to arrest hemorrhage.

I now present to you a photographic likeness of a patient affected with this disease to show that the plan of treatment which I have referred to is successful, even in cases where the disease is of such a nature, and situated in such an unfavorable location, as to afford but little hope of care.

Plate four represents a case of fungus hæmatodes of the eye. Wm. Kenna, the subject of this disease, presented himself for treatment in July, 1865. He was then five years of age. His mother noticed the first indications of the tumor about a year before, and it had been constantly growing until it had attained the proportions which you see represented in the plate. His general health was very much impaired by the intense and excessive pain which, for several weeks before I was consulted, had been almost incessant. I placed him under the influence of chloroform and removed the protruding mass, together with the entire contents of the orbit. I used simple water dressings for ten days; then began the application of the zinc and iron, which was continued until every remaining vestige of the disease was entirely destroyed. I then recommended the use of the water dressings until the disorganized parts had sloughed out. The wound was soon filled with healthy granulations, and in a short time he was entirely well.

Plate five shows his present appearance more than three years after the operation.

Plate six represents the case of a lady who was treated by me in 1849, for schirrus of the breast, involving the whole gland. I present this case to show that cases of cancer treated by this plan may be entirely cured, and remain so many years after treatment. Her condition in 1867 is shown in plate seven. She was placed under the influence of chloroform, and assisted by Dr. O. E. Newton, I removed the entire gland, with its integumental covering, leaving the whole base of the wound open and exposed. Water dressing was applied for a few days, after which he used the zinc, iron and hydrastis until the remaining cancerous disease was disorganized. After having kept it discharging for about two months, it was allowed to heal. Since the date of the operation the patient has enjoyed perfect health.

I could enumerate may other such cases, but think the above are sufficient to illustrate the principles of successful treatment first discovered and taught by me.

ARTICLE XXXVI.

Phytolacca Decandria. Contributed by WM. W. HADLEY, M. D., Professor of Materia Medica and Therapeutics in the Eclectic Medical College of the City of New York.

I do not propose to give the bontanical character or history of this plant, but to speak of some of its medicinal properties, and its uses in the treatment of disease.

It is found growing by the sides of fences, in fields, and by the roadsides, in nearly all sections of the United States, and is generally known, popularly, by the names of poke, scoke, garget, coakum, &c.; but it is not so well known as a medicine, nor so much employed by physicians as it is thought its virtues entitle it to be.

It is possessed of numerous valuable medicinal properties, being cathartic, emetic, alterative, resolvent, detergent, diuretic, and slightly narcotic, besides some other minor virtues which have been ascribed to it by various authors.

It is not extensively employed alone either as a cathartic or as an emetic, its effects on the body being rather too prostrating for general use; but it is often combined with other agents of these classes where a prolonged or constitutional effect is desirable: and especially in hepatic diseases of a chronic character, it is, in small quantities, an excellent addition to other remedies that may be employed in their treatment, as it has a special direction to the liver as well as the other glands of the body. In combination, therefore, with other medicines employed for the purpose, it is found to be one of the most efficient agents that can be used to produce an action upon this organ, when it has been for a long time in a torpid state, as it is frequently found; and needs remedies that are thorough, and at the same time are not harsh in their effects. By this, or similar means, the liver can be restored to a normal condition, and induced to perform its natural functions more readily, and with greater certainty, than by almost any other.

But its alterative properties are perhaps among its most essential virtues, which have perhaps been too much overlooked in the selection of remedies of that class. In cases of syphilis, mercurial diseases, ulcers, particularly those resulting from the use of mer-

cury, in scrofulous affections, tumors, and glandular swellings, there are perhaps few single articles preferable to the phytolacca in their treatment; and in combination with other alteratives, it adds greatly to the efficacy of the compound. It seems to stimulate the glands to a healthy action, remove enlarged and tumefied conditions, and also acts as a healthy depurator to the fluids of the body. In all cases where an alterative effect is desirable, I have found this to be one of the most useful agents of the class. Its medicinal virtues are given to water or diluted alcohol, or the remedy may be employed in substance. The root is the part mostly used in medicine, and may be given as an alterative in doses of from one to four grains; as an emetic or cathartic, from ten to thirty grains. The leaves and fruit, or berries, are also employed, the leaves possessing many of the virtues of the root; the tincture is also used in rheumatic diseases. The tincture of the berries has been much used by many in mercurial and ordinary rheumatism, especially when of a chronic character.

The tincture of the root is an excellant local application in the treatment of *tinea capitis*, producing some irritation and smarting; but it will frequently cure it, and that without cutting off the hair, which is more than many pretended remedies will do, and at the expense of far less pain and inconvenience to the patient. The pulverized root or leaves, made into an ointment with lard, have also been used for the same purpose; but where the tincture will succeed, I greatly prefer it, being more convenient of application. The inspissated juice of the fruit has been employed in cancerous affections; it is quite painful, and rarely of much service in their treatment, except in lupus in its incipient stages, where it is sometimes successful. In rheumatism, the same preparation is often excellent, especially in mercurial and syphilitic rheumatism; two or three grains of this extract will often quiet the severe nocturnal pains, when opium, morphine, and other narcotics have been vainly exhibited.

The extract of the root is used for the same purpose, but seems to be scarcely as efficient. In neuralgia and neuralgic rheumatism it is serviceable in allaying pain and reducing inflammation, and, from its alterative influence, is quite a useful article in their treatment.

Discretion should be observed in prescribing the quantity at a dose, nor should its administration be too long continued at one time, as it may produce prostration or debility. In cases where

such conditions follow, omit its use for a few days, and then recommence in smaller doses.

In reducing the root to powder, some care must be observed by the operator. The mouth and nose should be protected from the fine particles of dust, for if inhaled they will produce irritation and inflammation of the mucous membrane, inducing a condition resembling coryza, attended with much pain and cerebral disturbance. The writer was once afflicted with its dust in that way; from such "provings," the homœpaths have selected it as a remedy in the treatment of similar cases.

The powdered root, as is well known, is one of the ingredients in the irritating or compound tar plaster, much used as a counter-irritant. The recent root, roasted, and made into a poultice, forms a good application to felons, in which it will ease the pain, and often discuss them or drive them away; also, for tumors, for the same purpose; or, if too far advanced, it will hasten suppuration. The leaves also, bruised and applied locally, are useful in the treatment of tumors, and a strong decoction is valuable in hemorrhoids, taken internally in doses of a drachm or two, twice or three times a day, and used as an injection, *per rectum*, as often.

The extract may be made into a pill, with other agents, for chronic hepatic or scrofulous affections, or it may be employed in this way for rheumatism or painful neuralgic diseases.

A very excellent pill for cachectic conditions, attended with torper of the liver, general debility, with painful nervous disturbances, would be a suitable combination of the extract of baccæ phytolaccæ, podophylin, hydrastin, leptandrin, and ferri phosph. I do not present a formula, for every experienced physician will be able to graduate the quantities to suit himself, knowing the character and nature of the articles, and can adapt it to the varied conditions of particular cases.

Many cases of general debility, female weakness, and conditions of great prostration, where there are no manifest symptoms of special disease, except fugitive pains, weariness of body, and despondency of mind, that we meet with almost every day, and are evidently dependent upon a torpid condition of the liver, stomach and bowels, and, in females, complicated with uterine disturbance and nervousness, would be readily benefited by a compound of this character. It is tonic, invigorating, and alterative, acting upon all the glands of the body; cholagogue and

laxative, besides possessing the power to soothe and quiet the painfulness of the nerves. In the treatment of almost any disease, this would be an excellent assistant.

Many of our indigenous remedies have been too little used, and I regard this among the number. There are virtues in it that render it valuable in a variety of cases—in cases that will be apparent to the mind of every practical physician; and they may know of virtues possessed by it that are not mentioned in this paper.

ARTICLE XXXVII.

On Hysterical Paraplegia. An Essay read by HENRY C. COOPER, M. D., before the Eclectic Medical Society of the City of New York, January, 1868.

The term hysteria is given a wide range of application, and no doubt much of the uncertainty and annoyance which attends the treatment of nervous disorders in females would be avoided if a better nomenclature was substituted. While the study of psychological medicine engages a large share of attention from the more enlightened members of the profession, and journals are expressly devoted to the subject of insanity, the somewhat analogous disorder known as hysteria appears to be regarded as altogether unworthy of investigation.

Yet the symptoms thus designated occur so frequently that no practitioner fails to encounter them, and they give rise to a great deal of suffering on the part of the patient, and cause trouble and perplexity to her friends.

There is frequently in these cases some derangement of the womb, but this cannot be discovered in other cases, and it is quite as likely to result from disorder of other organs. In some cases, the hysteric symptoms seem to precede and develop the functional disease to which they are attributed as a consequence. But it is not my purpose to examine the subject of hysteria at any length.

I wish to treat briefly of that form of nervous derangement which confines the patient to her bed, without obvious physical cause, for a long period of time—sometimes until death occurs from other diseases, after a useless existence of ten, twenty or even thirty or more years.

This malady should receive more attention from the profession, as it occurs in persons who have previously shown no evidence of moral obliquity, and who occasionally appear as much perplexed at their condition as the physician too often becomes in his effort to remove it.

Through the mismanagement and egotism of the latter, much injustice and wrong are done to this class of patients in many instances.

About a year ago, I was called to attend a lady with whom I had been acquainted several years previously.

Her organization was delicate, but she had been remarkable for activity; she was the mother of four children, who were all healthy and well grown.

Two years previous to the time I saw her, she was taken sick with fever. After the feverish symptoms abated, she found herself unable to take exercise, and had gradually become helpless. She had to be lifted in and out of bed, and could not remain long in any but a recumbent position. I found her bolstered up in a semi-recumbent posture, in bed, having a weary and melancholy expression of countenance. She complained of being unable to use her lower limbs, and expressed astonishment that her arms should retain their normal strength. Her appetite was usually good, and her digestive organs apparently healthy. She was subject to neuralagic paroxysms, which ordinarily lasted three days and left her much exhausted. While her pains continued, she had no desire for food, but her appetite returned as soon as they had ceased. Her bowels were habitually constipated, and she was accustomed to relieve them by taking cathartic pills.

There was tenderness in the lumbar region of the spinal column. She had frequently attempted to exert herself in sewing, or tried to sit up in a chair; but fatigue was quickly induced, and if the efforts were persisted in, she was attacked by neuralgia of the face, and was now disinclined to incur the risk of bringing on herself such torture, as it lasted long and prostrated her greatly. She was discouraged by the failure of the remedial measures that had been employed, and especially by the fact that all her exertions seemed to result disastrously. She had tried many forms of medicine, and when I visited her first, was taking a preparation of iron, which had been prescribed, with cathartic pills as required; wine daily, and nutritious food. At first she had thought her medicine helped her—but neuralgia had supervened, and all the apparent benefit was lost.

As there were no evidences of anemia, I discontinued the iron, fearing its tendency to produce constipation, and ordered the substitution of citrate of magnesia for pills, as a laxative.

I directed a plain diet and the use of wine to be limited to those conditions of exhaustion which she appeared to anticipate. I desired her to accustom herself to society as far as she could without causing fatigue or undue excitement, and to take no other physic than might be needed to keep the bowels open as often as once every alternate day. It was then May; and I suggested that

as soon as the weather became sufficiently pleasant she should remove to the country.

Care was taken that no solicitous attention should confirm her idea of helplessness, nor evidence of disbelief in the reality of her complaint, irritate her excitable nervous system.

She was, by this means alone, soon restored sufficiently to walk about her room, and to ride out occasionly with benefit.

At this time my connexion with the case ceased.

In another patient, violent pain was caused by the slightest weight pressing upon the bed clothing which covered her, and as she was unable to rise, her food was brought to the bedside, and placed before her with the gentlest care. This lady was very intelligent and fond of society. Her family was convinced that her case was incurable, as she had, for some ten years, been under treatment, at intervals, without being benefited.

By judicious measures, patiently continued, her social talents were developed, and finally she was persuaded to allow herself to be lifted into a carriage. Her friends expressed the fear that she would die before she returned; yet the carriage was driven off, and the gentle motion, added to the agreeable excitement of the ride, resulted so favorably, that there was no difficulty in inducing her to repeat the exercise from time to time. Her recovery was rapid and complete, and she subsequently married; and, I am informed, is now a healthy and happy mother.

It is a prevailing error to regard these cases as wholly fanciful, and to treat the patient as if she was criminally responsible for her condition. Some over-candid friend is apt to tell the lady that she would be quite well if she chose to think so; or she may, in the patients' hearing, censure the family for indulging her caprice.

One doctor will prescribe iron and tonics; and when no improvement takes place, he will be succeeded by another who tries the efficacy of bread pills and colored water.

The friends recognize better than the physician, perhaps, the inability of the patient to throw off the disease; but they are deterred from sending for medical aid by the conviction of its inefficiency; and a woman who might be useful in her sphere is left to drag out an aimless, comfortless existence, the monotony of which is only relieved by paroxysms of torturing pain. There is, apparently, no effort to arrive at an intelligent appreciation of

the character of her disorder, and, consequently, no consistency or certainty in its management.

It is evidently incorrect to regard a disease which causes so much real suffering as an imaginary complaint. There is a pathological condition of the nervous system in which the nerve force is deficient. The disease, probably, originates in the ganglionic centers, but is soon extended to the cerebral and spinal nerve systems. Sudden and powerful mental emotion will at once put a stop to the digestive functions. Anxiety, bereavement, disappointment, continued opposition, or illness of long duration, will produce nervous depression, as manifested by impaired digestion and diminished circulation. The patient becomes incapable of exerting the power of the will, or conducting mental operations with customary vigor. If physical exercise is attempted, the effort is improperly made, or the strength exceeded. The perverted nervous condition manifests itself by violent pain, which prostrates the sufferer and deters her from persistent exertions. The *vis medicatrix naturæ* is inoperative, because continually antagonized by mental, moral and physical agencies. The patient is either petted or abused; and, conscious of her weakness, but unable to discern any means of overcoming it, she falls into a state of despondency, or sinks into listlessness. Such a patient is no more deserving of ridicule than an insane person.

In proportion as she is unable to help herself, she needs encouragement and assistance.

Irritating and annoying influences must be withheld, and care be taken that the digestive organs are maintained in healthy activity.

Exercise must be prudently adapted to the feeble condition of the physical powers.

The nervous force is at a low ebb; and if the point of reaction is passed, prostration and painful nervous disturbances discourage the patient and retard the cure. The secretions must be regulated, but it is desirable to avoid fixing the patient's attention too closely upon the action of medicine. In giving directions, a margin should be left for any accidental failure in anticipated effect. Where uterine derangement exists, it must, of course, receive the physician's care, as no cure can be effected until it is relieved.

The medicinal agents called for are such as generate nervous power, allay nervous irritation, and remove constipation of the bowels.

For the latter purpose, nothing better can be found than podophyllin and leptandrin; citrate of magnesia answers a good purpose, often.

Quinine and steel are often required for debility, or as antiperiodics. Senecin, hydrastin, cypripedin, and other concentrated preparations will be found serviceable. Bromide of potassium, phosphate of iron, and valerianate of zinc, are often advantageous. Baths, gentle exercise, change of air and scene, and mental occupation are extremely beneficial; and usually, when the patient can be got into a condition to allow of gentle exercise in a carriage, the cure will progress rapidly.

ARTICLE XXXVIII.

Thoughts on the Art of Prescribing. An Essay, read before the Eclectic Medical Society of the City of New York, February 19th, 1868. By JAMES DAY, M. D., Professor of Chemistry in the Eclectic Medical College of the City of New York.

The developments of materia medica, chemistry and pharmacy, have progressed with such rapid strides, during the last few years, as to have exploded many previously conceded theories, and established many that are new. At the same time there have arisen assumptions that will bear investigations, springing from the natural desire, to approximate (hastily) a point of perfection, only to be reached by careful study and investigation.

It is a common source of vexation to the recent graduate of medicine and the active practitioner, to prescribe and compound their remedies in a scientific and systematic manner, and they are liable to fall into errors, from which no amount of experience will entirely free them.

No branch of the science of medicine is of more importance than the art of prescribing, or puts the ingenuity of the practitioner to a greater test; and yet, up to the present time, it has been treated as an almost unimportant part of his education.

It has been, and is, the common custom, to combine several medicinal agents, to meet as many indications, without a proper appreciation of the change that may be produced, therapeutically and chemically, by the admixture.

Dr. Powell remarks, "that it may be asserted without fear of contradiction, that no combination of five or six simple remedies has had its combined power examined in a rational manner."

It is not to be wondered that a subject so important should have been so much neglected, when we consider that a large acquaintance with the sciences of chemistry and pharmacy are necessary to its elucidation, and that these sciences are but beginning to be clearly understood.

The advisability of employing in every case (where it will meet the indication) an uncombined remedy, is attracting the attention of all scientific and progressive physicians; and while it cannot be be denied, that in many cases a single remedy may, by combina-

tion, not only act with greater certainty and less inconvenience, but that its sphere of action may be much more extended; yet we must not disregard the many chances of failure necessarily incurred by combinations not sanctioned by experience or science.

The practice of combining several ingredients to form one remedy is of ancient origin, most of the prescriptions that have been handed down from antiquity, are of this form. In some of them the large number of agents huddled together, without the slightest regard to order or design, lead us to suppose their only object was, to produce the greatest possible amount of changes in a given number of articles, without reference to the effect those changes may have had on their therapeutic action.

That this blind dispensing of drugs is continued at the present day is well attested by the fact, that most intelligent physicians find it requisite to depart from the galenical preparations of the dispensatories.

In the pharmacy of the past schools of medicine, the greater number of their remedies belonged to the inorganic class, and inorganic chemistry having been brought to a tolerable state of perfection, the studious physician was possessed of ample information to prevent the admixture of incompatibles, so far as the medicine was concerned.

The more advanced school of the present day, depending as it does principally on the productions of organic life for medicinal agents, must and will find it imperative to use combinations with the greatest caution, until experience, or the further developments of organic chemistry shall prescribe the compounds, or define their errors.

But, as all extravagant systems have a tendency to produce extremes of an opposite character, it becomes our duty in endeavoring to fall back on simple remedies, not to discard the teachings of nature in her combinations.

It has occurred to me, that the thirst for isolated and concentrated medicines is possibly leading us into grave error; that we are, perhaps, to a certain degree, relinquishing efficacy for eligibility and convenience. For a physician of the present day to accept and employ all powdered preparations, purporting to be the pure and unaltered active principles of given agents, when chemistry and pharmacy have demonstrated that in many cases, such active principles exist, as semi-fluid oleo-resins only; and knowing, as we do, that oleo-resins are not readily reduced to the

form of powder, reflects great ignorance, or at least carelessness. No preparation that is not supported or sanctioned by science, should be for a moment considered, more especially when the mode of preparation of such scientific impossibility, is concealed.

Each simple remedy, as it exists in nature, is a combination of itself. This should teach us not to be too exclusive in the use of isolated remedies. Take up almost any vegetable agent and it will be found that its full therapeutic action is not confined to any one principle, but to the wonderful combination and modification of several, and sometimes opposite, principles.

How many tonics do we possess that will not be deprived of half their virtues if separated from the aromatic stimulant principles in combination. We have isolated quinia for the sake of convenience and accuracy; but how few, if any, prescribe it for its permanent tonic effect, except in combination with some aromatic and, perhaps, astringent? It is an admitted fact that quinia is not only better received, but will produce more powerful tonic effect in combination with tannin and aromatic sulphuric acid, than alone. In Denmark the whole of the Peruvian bark is bought and owned by the government; the agents of the crown arrive at its quality by testing it, not for the amount of quinia it contains, but the tannin in combination with it.

It is needless to state that morphia does not possess all the virtues of opium.

In regard to hydrastin, Dr. King says: "A decoction of golden seal exerts an influence in sore mouth, and other affections, not to be obtained from the so-called hydrastin."

We shall yet find that this blind craving after concentration, eligibility and convenience, has carried us beyond a point of prudence, and that we shall be compelled to return, in some measure, to concentrated liquid preparations, as the only means to obtain and retain in a state of purity all of these wonderful combinations of nature. Some have already returned to the almost obsolete preparations known as infusions and decoctions.

I do not desire to be understood as disclaiming powdered concentrations, but rather as discriminating between those that represent the full therapeutic action of the plant, and others that represent but a part; between the action of a single isolated principle and the beautiful combinations of nature, produced in her laboratory, through the influence of her special re-agent, vital

force, and a desire to contend against all empirical pretentions to produce such combinations by artificial means.

The value of many of these agents (and to the Eclectic school belongs all the credit of their discovery), has been established beyond the possibility of a doubt; but some persons have become so elated with their success as to accept and trust with equal confidence *anything* bearing the name of concentration, without an examination of its chemical construction, or an investigation as to its scientific possibility. Such errors would tend to lower the standard of our science in the eyes of the world. The difference between the true physician and the empiric is this: the latter exhibits the same medicine in every case, while the former examines, in a spirit of philosophic analysis, all the existing peculiarities of his patient and his disorder, and being thus led by a sagacious induction to an estimate of his vital power, and to a knowledge of the nature and condition of the peccant organ, he adopts, with a sound discretion, and with a correct judgment of his agents, such means as may be best calculated to control or remove their morbid condition.

It would seem, therefore, that the first and most important point is the selection, from the materia medica, of the agent most likely to meet all the indications and general results of the case, and when such an agent can be found, to administer it alone. We will call this the basis.

The next point is, to select the best preparation of that agent, with regard to efficacy, safety and physical properties, not sacrificing efficacy to taste and appearance, but at the same time to administer in the most palatable form, compatible with efficacy, safety and all other considerations.

Where combinations are indicated, we must understand with precision the objects to be gained, their modes of operation, and the laws by which they are governed.

Too much importance cannot be assigned to the art that thus enables the physician to adapt and graduate a powerful remedy to each and every symptom and case. Without this knowledge, the practitioner of the present day, with all the collateral aids of modern science, thoroughly drilled as he may be in the best principles of pathology, will be as feeble in the sick chamber as the physicians of ancient Egypt, who were obliged, by the ethics of their school, to follow the unvarying mandates of their code; or

their followers of the present day, who allow their better judgment to be enslaved by the servile exactions of their alma mater.

The first consideration under the head of combinations is to promote or correct the action of the basis by obviating any unpleasant effects it might be likely to occasion, and which would defeat the objects of its exhibition. As an example, we might point to iodine, which is precipitated by any suitable excipient, and, in consequence, may produce an injurious irritation of the alimentary canal. The addition of iodide of potassium, not only obviates this difficulty, but intensifies the action of the agent.

So with podophyllin. Soluble only to a certain point in concentrated alcohol, it is readily precipitated by any menstruum suitable for administration. Encountering acids in the stomach, it is rendered still more insoluble, and produces gastric and intestinal irritation. In the case of this agent, there are two modes of combination, which both heighten and temper its action, or more properly direct it in the desired channel. The first and best, is to add an alkali to a fluid preparation of podophyllin. The syrup of rhubarb and potassa, is, perhaps, preferable, owing to its tonic and astringent properties. If well prepared, this combination will never produce griping or any irritation of the alimentary canal. Where, however, the powder is preferable, it may be triturated with a known quantity of magnesia or soda, which assists and corrects its action in two ways. 1st, by neutralizing the acid of the stomach, thereby favoring solution and absorption; 2d, by a finer division of its particles.

Another example is the addition of turpentine and laudanum to castor oil, to diminish the purgative effect and prevent griping. On the same principal, the addition of citric acid and other agents are said to mitigate many of the disagreeable consequences of the action of opium.

These additions to a basis may be called adjuncts.

Such adjuncts should never be employed without a clear appreciation of their necessity, and a definite knowledge of the result.

The next point is the combination of the basis with substances of a *different* nature, which do not exert any chemical influence upon it, but render the stomach or system more susceptible to its action. As in vegetable productions, or educts, there exist elements which, although in themselves inert, may confer additional activity upon the principal ingredient; so in artificial combina-

tions, the basis of a medicinal formula may receive an increased power from the accessory substance.

This may be readily illustrated by a few examples. In diseases attended with diminished sensibility of the stomach, for instance, intermittent or other fevers, we employ capsicum and other stimulants and relaxants, as adjuvants to our tonics and antiperiodics, the operation of which they greatly promote. On the same principle, ipecac is added to jalap and other purgatives; indeed, some assert that ten grains of jalap, assisted by two grains of ipecac, will purge more than twice that quantity administered alone.

Bitartrate of potassa becomes a valuable adjunct to anthelmintic and other medications, in certain disordered conditions of the alimentary canal, accompanied by an abundant coating of morbid mucus, which, without the action of the bitartrate of potassa, would protect the membrane from the action of the medication.

The infusion of senna is both augmented in power, and modified in action by bitter infusion.

Molasses is more sweet than refined sugar. Why? Because it contains a large amount of extractive matter.

Balsam of copaiba in certain conditions of the system, passes off in liquid stools, and its diuretic effect lost; but combined with liquor potassæ, with or without laudanum, and the desired action is obtained.

It is perhaps need less to add that change of diet or habits, will often prove a valuable adjuvant to medication.

Adjuvants may be employed to protect the system against the deleterious action of some basis. Ipecac, lobelia, turpentine, or guaiacum lose their diaphoretic or diuretic action, if allowed to purge. So with alteratives, they require in many cases combination to temper their action.

The tendency of alum to disturb the bowels, is prevented by the addition of cinnamon or nutmeg. The administration of acetate or citrate of potassa, is based on this same principle; the design being to protect the stomach from the action of the strong alkali, and to obtain its effect in the circulation. A combination of ipecac with opium will prevent its determination to the kidneys; hence their relation in the diaphoretic powder, with a view to produce determination to the skin.

There will often arise a *necessity* to combine medicinal agents

to meet two or more symptoms—as, for instance, anti-spasmodics with tonic, and quinia and gelsemin are a sample; purgatives and tonics, quinia and podophyllin; astringent and tonics, quinia and tannin, or quinia and sulph. zinc; diuretics with tonics, in dropsy with debility, and many others.

In the arrangement of combinations one should seldom attempt to fulfill more than two indications, for if we can look beyond symptoms to cause, this will seldom be necessary. Where the compatibilities of agents are not understood fully, it is far better to administer alone, at stated intervals.

Another object of combination is to obtain a new action, not to be produced by any single remedy. I will give one example only—the fluid extract of wild cherry. The hydrocyanic acid, on which its sedative virtues depend, does not obtain in the bark, but is developed by the action of emulsin on the amygdalin of the bark; its best excipient, therefore, is an emulsion of sweet almonds. The admixture of these preparations instantly liberates sensible quantities of hydrocyanic acid. In the infusion of the bark it is formed and lost, the water liberating the emulsin; the acid is formed and dissipated by the heat.

Another object of combination is to afford an eligible form. When a combination requires any addition for the purpose of convenience of form or flavor, a vehicle should if possible be selected, the effect of which will correspond with the intention of the other ingredients.

Thus, syrup of orange peel to tonics, syrup of tolu to expectorants; cinnamon to astringents, &c.

It should also be an object to suit the form and flavor of our medicine to the caprice of our patient. This should be done, however, withont any detraction from the efficacy of our medicines, as a compromise with efficacy and eligibility would be discredible to the physcian and derogatory to his profession.

Dr. Paris says, "he has known those, who, rather than shock the delicate nerves of their patient, would suggest the use of an umbrella in a shower bath."

These are a few of the objects to be gained by combinations, and the principles that regulate them; but it cannot be too clearly understood, that unless the physician can explain satisfactorily to himself the result of the combination, it is far better to err on the side of simplicity.

A physician being once asked why he put so many ingredients

into his medicine, replied; "so the disease may choose which it likes best."

It is now an accepted fact, that unless the logic of a combination is perfectly understood, the greater the complication the more chance of failure.

In reading a prescription, if the intention is obscure, the operation will be of little or no effect.

The dose of medicinal agents will often determine their specific action. Quinia, in small doses, acts as a stimulant and irritant; in large doses as a sedative and diaphoretic. Camphor, in small doses, is sedative and diaphoretic; in large doses, stimulant and nauseant. Alum produces constipation in small doses; in large doses it is cathartic.

A correct knowledge of the chemical composition of our agents is of the utmost importance in regard to their scientific admixture; and the fact that many of our most reliable simples have not yet been investigated, is a cogent reason for avoiding complications. We would further suggest that it is one of the most important duties of the advocates of progressive medicine to assist in their investigation in every possible manner.

How can we decide between an infusion and decoction of a crude drug without a knowledge of the elements engaged, and their mutual reaction. It would evidently be a great error to order a decoction of a drug, the virtue of which reside in a volatile principle. Take so powerful an agent as hemlock, and a decoction will be found comparatively inert. The absurdity of adding solutions of resins to aqueous medicines, without the intervention of mucilage, is apparent to all. So, also, the incompatibilty of astringent principles with alkaloids. This is the chief cause of the precipitation of hydrastin, when combined with other vegetable agents.

Another species of incompatibility is that of strong alcoholic solutions and others, with mucilage, but if the mucilage be diluted, and the spirit or ether added last, the gum is not coagulated, the alcohol being so instantly and largely diluted as to exert no specific action on the particles of gum. Again we might point to a combination containing ether and a powerful alkaloid; the ether in most cases would separate the alkaloid from the mixture, and by floating on the top, an excessive dose be taken and terminate fatally.

The noted nostrum, Mrs. Winslow's soothing syrup, is a good spe-

cimen of empirical pharmacy. It contains morphia and oil of anise. The oil, not being properly incorporated, floats in the upper part of the bottle, and being administered by a careless nurse, might cause strangulation.

By carefully and candidly investigating the causes of failure in the employment of combinations, we may not only detect the source of error, but add greatly to the advancement of science and truth.

ARTICLE XXXIX.

The Qualifications of the Physician. A Paper read before the Brooklyn Academy of Eclectic Medicine. By Henry S. Firth, M. D., November, 1867.

Mr. President and Gentlemen of the Society: With your permission, I propose to call your attention for a short time, to what I consider to be a few of the requisites necessary to prepare a physician for honor and usefulness in the profession. Unquestionably, the recognition of a Divine interference in the affairs of men becomes a matter of the first importance in the qualifications of a man proposing to assume this sacred calling. I say sacred calling, for while many of the other arts pursued are the inventions of men, the science of medicine is a God-made one; and he is best qualified for the discharge of duty, whose mind and affections are in harmony with its great Author. The hour of affliction is the time when serious impressions are most easily made; and none so well as the physician can give the mind a healthy spiritual direction. When we consider of how much more value the soul is than the body, we must admit that he is poorly qualified to sustain the character of a medical man, who cannot, from a practical stand-point, administer spiritually, as well as medically. Before entering upon the study of medicine, the motives leading to its selection should be carefully examined. The merchant and mechanic make their choice from a purely pecuniary stand-point; humanitory motives have nothing to do in the matter; with them the dollars, and the animal comforts that the dollars secure, is the foundation and cap-stone of ambition's temple. The legal man (with some honorable exceptions) is as ready to screen a culprit as to aid a friend. A brown-stone house, and a seat in Congress, are objects of his highest ambition. The warrior, under the garb of patriotism, would, in many instances, impoverish the country, and fill it with grave-yards, could he thereby secure the trappings of a major-general and win the plaudits of the multitude. If no higher or more disinterested motives influence the candidate for medical honors, he had better direct his attention to some other calling; for while he may succeed in accumulating money, he will miserably fail in accomplishing the high aims of the profession,

and in the end will be loaded with a weight of unfulfilled responsibilities "that will bite like a serpent, and sting like an adder." God's poor and afflicted ones have some claims upon the medical men, which, if met in a right spirit, will yield returns richer than the mines of Australia, and "sweeter than the nectar of the gods." The student, having carefully weighed the matter, and made up his mind that he is a man for the situation, his next interest will be to select from the many the right system to pursue. Upon a proper decision in this direction will depend much of his future usefulness and success. Just here permit me to volunteer a little advice, predicated upon reason and experience. While all changes are not to be considered reforms, be it understood that reforms are often necessary. The mighty commotion of the atmosphere above and around us, and the fearful lashing of the waves of the ocean, are the means intended for their purification. The moral world is constantly agitated, and rapidly progressing in all that goes to make up goodness and greatness. Not alone in literature, arts and arms is this observable, but as well in politics, religion and medicine. In politics, man has been gradually working up from the servile subjects of despotism, through the milder forms of monarchy, to democracy. There are comparatively few among us who, fifteen years ago, would have accorded civil liberty to the colored race, had we the power to do so; while at the present time there appears a strong disposition to grant them political and social equality.

Religion, though unchangeable in its character, requirements and aims, may be, and is, variously understood, and its out-flowing results affect individuals differently. Though wisely adapted to better the condition of man, in either a crude or cultivated state, yet the egotism and bigotry that formerly mingled with its teachings is fast giving place to an attractive sympathy, governed by the great law of love. Its manifestation, too, though less proscriptive and boisterous than formerly, are evidently becoming more healthy and elevated in character. Thus, while all human efforts are working up to higher forms of beauty and activity, Medicine ought not to be an exception. It is here where I would claim a necessity for reformation; and would advise students and others to unite with us for its accomplishment. The question is frequently asked: Where is the necessity for a school different from allopathy? Why not bring all discoveries and improvements into their school, and have one profession? We would

answer that their bigotry, wrong and dangerous teachings, as well as their obstinate unwillingness to receive anything better, made a reformed school necessary. Some of their great lights, among them Dr. Rush, told them clearly and plainly of their wrong dogmas and practices, but they still continue, as far as they dare, to practice them. It is a well known fact that they never did renounce an error, until driven to it by the force of public opinion. From the first third of this century, back for generations, there was probably more blood shed by the lancet alone than suicide, murder and war combined; and they would have still continued it had not the public been aroused to indignation by the voice of reform. The people saw the danger, and dreaded the doctor almost as much as the disease. In truth, they had good ground for fear; for, in place of treating their complaints rationally, they according to their own authors, increased their malignancy; and, more than that, in the matter of syphilis they not only failed to expel the poison, but by means of mercurials changed its character, and propagated a host of obstinate, loathsome skin diseases, called syphiloids, thus threatening contamination of the whole race. (See "Bell on Venereal.") Thus the call for a change became indispensable, and Eclecticism came in as the want of the time. We claim to hold the same relation to medicine that ironclads do to the navy; and the various other systems must become remodeled and reconstructed, or be water-logged upon the great ocean of popular opinion, and sink from public recognition by reason of their own rottenness. At present the people seem ripe, and the time propitious for discarding the errors of the past, and introducing a more safe and common sense system of practice. The time is close upon us when men will lay aside their prejudices and collect all that is innocent and truthful of the past, adding fact upon fact as developed in the way of discovery, until there will be one grand system, and that system Eclecticism. This brings us to the necessity of having firmly established and well sustained schools among us; and it behooves us to see to it that students favoring reform attend upon the instruction of our own teachers. There is danger attending their connection with other schools. The poet, speaking of the danger of evil association, truthfully says: "We first scorn, next pity, then embrace." Left to the teachings of error, the poison insidiously enters their minds, and ends by their being committed to allopathy, or becom-

ing hermaphrodites in medicine, owned by neither party, but pitied and ignored by all.

Having said so much to students, and in defense of our doctrines and principles, I propose deferentially to say a few words to older members of the profession, to stir up their minds by way of remembrance. The responsibility of our position will be better understood, when we consider the value of human life, and the relation we sustain to that life. The destiny of nations for generations not unfrequently hangs upon the life of one individual. Suppose, for instance, that Washington had died in youth; think you that the age would have produced a man to fill his place? And would this country have attained its present greatness and conferred so many blessings upon other nations, under a monarchial form of government? Had the world been deprived of a score or two of men such as Luther, Baxter, Calvin, Wesley, Fletcher and Whitfield, as religionists; Copernicus, Columbus, Newton, Herschel, Franklin, Fulton and Morse, in the scientific world, and Thomson, Beach, Morrow, Newton and kindred minds in medicine, what would have been the condition of the world at the present time? Such men require no marble monuments to tell positively that they have lived. Their towering intellects, their noble aims, their untiring industry have written for them a history that will live while time endures. When we take into consideration the fearful mortality attending the allopathic treatment of disease in the past, it would appear to be only through Divine interference, that many of the above named men were permitted to live to bless mankind. Doubtless in the womb of the future lie in embryo beings destined to confer upon our race benefits even greater than those conferred by the noble men who preceded them.

But there are other considerations than those of a public character. Every family forms a little government of its own. The bundle of helplessness in its mother's arms is the object towards which the heart's warmest affections tend. It is to them the embodiment of all that is pure and perfect. Take that child away, and the incentives to industry and continued efforts in the great interest of life measurably decline, and the sun of their hope goes down in darkness. Thoughts like these will give us some idea of the value of life, and our responsibility in relation thereto. Sympathy, largely developed and well cultivated, is a necessary element for usefulness in a medical man. Not a morbid sympathy

that would tend to engender fear and embarrass the judgment, but a kindly feeling based upon moral principles; one that can enter into the sorrow and pain as well as the pleasures of a fellow-being; such as would inspire confidence and qualify a man to act as friend and adviser upon all proper occasions. At the same time great care should be taken that our sympathies do not lead us into too great familiarity with patients; for while there are a few with whom it may be safe to become familiar, yet, as a general thing, it will tend to lower us in their confidence and respect, and neutralize the good we seek to accomplish.

There is another matter in this connection that it may be well to mention: The evil of consuming too much time unnecessarily with our patients. Aside from direct professional and pecuniary considerations, our time is exceedingly valuable. Time once lost never can be regained, and what of good we hope for in life will require an effort. Every hour lost is a wrong done to ourselves and others, because we thereby deprive ourselves of the only means that can prepare us for usefulness, and, consequently, happiness; for without usefulness there can be no happiness. We also indirectly injure others from our failure to do them the good they have a right to expect at our hands.

Medicine is a progressive science, and unless we progress with it, and seek to add something to it, we will most assuredly fail in retaining a respectable standing, and will be compelled to take a position in the rear rank of the profession. Many persons that nature has done much for, instead of burning with a clear and increasing flame, shoot up at first like a rocket, with considerable noise, sparkle for a moment, and go out in darkness. A man with mind enough to become a good physician ought to be more than that. He should be far in advance of the multitude in all that relates to history and scientific subjects. Then, why, as a rule, are we not so? Doubtless from two principal reasons: A want of proper economy of time, and a right system of study. We spend too much time in trivial matters, unprofitable conversation, amusements, &c., and indulge in too much exciting and unimportant reading to the neglect of acquiring that kind of information that would improve the mind and better the heart.

There is another duty too little appreciated—that of keeping a record of our more important cases in practice. Probably all of us have been called to treat diseases presenting peculiar and interesting features. They call for a great deal of thought, and,

perhaps, not a little consulting of authors. We resort to various remedies, watch their operations, and, when we dismiss the case, think little more about it until it fades from our memory, and all our experience is lost to ourselves and others. Here lies our most serious mistake. What a fund of information we could lay up, and with what advantage we could use it in the future? Many of us are approaching that time in life when memory will prove treacherous, and we will need all the experience of the past to assist us in our duties. It may be late in life for many of us to begin reformation, but much may yet be done. Your humble servant acknowledges culpability in this matter, but proposes to do better for the future.

Gentlemen of the Society, permit me for a moment to call your attention to another interesting consideration: It is evident from the partial failure of the past, that medicine is far from being reduced to an exact science. And while it is right and indispensable for us to adopt all that is valuable in other systems, yet our mission lies not with them. Taking the middle path between extremes, we must seek to build up a more perfect system. From what has been done in the past, it is evident that the genius of medicine points mainly to the vegetable kingdom as our hope for the future. Had nature intended the herbs and flowers alone to please the eye and gratify the senses, they would, without doubt, have been created medicinally inert. But, from the fact that hundreds of them bear no special beauty and regale no scents, but almost invariably yield medicinal agents to fulfill wanted indications, it would seem that the finger of God pointed to them as means to meet our most urgent wants. This being the case, then, with what earnestness we should give them our attention. How wide the field before us, and how comparatively little we know about it. But, thanks to a few liberal and progressive minds, a new era is opening before us. The darkness of the past is giving way to a light portentous of a bright day. Legal embarrassments and proscriptions are among the past, while sneers and misrepresentations will no longer pass current with the people. Selfish and ambitious men cannot always aggrandize to themselves honor and patronage, but a rescued humanity will accord the meed of praise to where it of right belongs. Truth is sure to ultimately prevail; yet it may be retarded in its development by the apathy of its professed votaries. What we want is: that every Eclectic should study organic chemistry, and turn his attention to the

analyses of the vegetable kingdom ; then ascertain the real value of their products in clinical practice. Before concluding, allow me to observe that, as Eclectics, we must exist together as a body, or lose our rights altogether as individuals. We have a vigilant, proscriptive and bold enemy to encounter in the persons of our allopathic neighbors, who will take advantage of any division among us, or want of interest on our part, to crush us. Our progress is higher, and has been contested step by step by them, and the conflict will continue until one of us looses our identity as a body. To command respect from others, we must respect ourselves and each other. By preferring our Eclectic brethren in consultations, and by every proper means promoting each other's welfare, we will dignify the profession, and elevate that branch to which we stand attached in the estimation of a discriminating public. It was only as a united body, appealing to popular judgment, that we obtained recognition, and it will require continued, harmonious, determined efforts to place Eclecticism in that honored position that its merits entitle it to enjoy. Societies are made up of individuals, and, as every particle of cement adds strength and durability to structures, so each member of our body may exert an influence that will tend to strengthen and build us up. When we consider the wealth and influence that have been brought to bear against us, it may be safely asserted that no body of scientific men have done so much for mankind, in so short a space of time, as the Eclectic physicians of this country.

The large amount of creditable literature, discoveries in organic medicines, and the revolution in public opinion as to practice, are results that would do no discredit to a century of faithful labor. With the organization of respectable schools, formation of local societies, and a prospective national society, we have everything to encourage us for the future. With our increasing facilities for instruction, and the hold we are taking upon popular judgment, it will not be long before we have equal share in the benefits of hospitals and other public institutions. And, doubtless, before the students in our schools shall have attained the age of many of their teachers, all over this broad land a diploma from our schools will be a sure passport to a lucrative and honored position, and Eclecticism be universally respected and adopted.

ARTICLE XL.

Constitution and By-Laws of the Eclectic Medical Society of the Thirty-Second District of New York.

CONSTITUTION.

We, the undersigned members of the medical profession, with a view to cultivate fraternal relations; receive and bestow that mutual benefit incident to association, and to aid in every way practicable the popularization and spread of the great principles we entertain of medical reform, do ordain and establish this Constitution and the By-Laws that follow, for the Eclectic Medical Society of the Thirty-second District of New York.

ARTICLE I.

This Society shall be known as the Eclectic Medical Society of the Thirty-second District, State of New York.

ARTICLE II.

Any "doctor of medicine," or any practitioner of medicine who has sustained a reputable practice for five years, whose character for intelligence, virtue and patriotism is without reproach, may become a "Fellow" of this society. Candidates for fellowship must be recommended by a Fellow of the society; they shall be received by ballot, and, if three or more ballots appear against a candidate, he shall be rejected. All candidates must sign the constitution and by-laws, and pay the fellowship fee, before they can assume the privileges which fellowship confers.

ARTICLE III.

SEC. 1. The officers of this society shall consist of a President, Vice-President, Secretary and Treasurer, who, by virtue of their offices, shall constitute the Board of Directors, to whom shall be entrusted the corporate affairs and general business of the society when it is not in session. They shall continue in office until their successors are chosen. The election of all officers shall be decided by a plurality of votes after the first formal ballot, if that ballot fail to elect by a majority.

Sec. 2. The duties of the President and Vice-President shall be such as usually appertain to these offices in like bodies.

Sec. 3. The President, at each annual meeting, shall appoint an orator to deliver an address at the next annual meeting; and, at each regular meeting, he shall appoint three essayists to report on some subject connected with medicine at the next regular meeting. He shall also, at each annual meeting, appoint four delegates to the State society.

Sec. 4. The Secretary shall keep a record of the proceedings of the society, receive all moneys, and pay the same to the Treasurer; sign all credentials and certificates of fellowship, and shall annually report the amount of money received and disbursed, together with such other items as may be of interest to the society. He shall also conduct and have charge of all correspondence, issue notices of regular meetings, and cause one to be sent to each Fellow of the society, and to the President of the State society.

Sec. 5. The Treasurer shall receive and have charge of all moneys belonging to the society, and pay such bills, and only such, as have been audited by the Board of Directors, and annually submit his report to the society. If required, he shall execute to the Board of Directors sufficient bonds as security for the faithful performance of his duties.

Sec. 6. The Board of Directors shall have power to fill vacancies, audit all bills, procure a seal, secure suitable rooms for the accommodation of the society, issue an annual publication of the transactions of the society, or a special publication of the proceedings, or any part thereof, of any particular meeting of the society, copies of which shall be distributed to all members who shall have paid their dues for the corresponding year.

Article IV.

Sec. 1. The annual meeting shall be held in Dunkirk, on the third Wednesday of May in each year.

Sec. 2. Semi-annual or quarterly meetings may be held at such times and places as shall be elected by the society from time to time.

Article V.

Five Fellows may constitute a quorum of the society. Three Directors may constitute a quorum of the Board, provided that each Director shall have been notified of the time and place of meeting.

ARTICLE VI.

A certificate of fellowship may be issued by the Board of Directors, and a copy bearing the signature of each officer furnished to each fellow on the payment of two dollars for the same.

ARTICLE VII.

Proposals to alter or amend the Constitution shall be presented in manuscript, and read at a regular meeting, when it shall lie over until the next annual meeting, unless there be a unanimous desire to act upon it immediately; but no alteration shall be made at any time, except by a two-thirds vote of all Fellows present.

BY-LAWS.

ARTICLE I.

SEC. 1. The election of officers shall take place at the annual meeting on the third Wednesday of May. The reports of Secretary and Treasurer shall be submitted at this meeting.

SEC. 2. Special meetings may be called by the President at the request of members.

ARTICLE II.

All persons received into this society shall pay the sum of two dollars on signing the Constitution. This admission fee shall be received in the place of the first year's dues.

ARTICLE III.

All members shall pay the sum of two dollars a year, after the first year, to be appropriated with the initiation fee to defray expenses of the society; and no member who may be in arrears for dues shall be allowed to speak or vote until such arrearage be paid.

ARTICLE IV.

Any member who shall be guilty of unprofessional conduct, as established by the received code of ethics, after such code shall have been promulgated, and who shall refuse to conform to the Constitution and By-Laws, or who shall be guilty of repeated disorderly conduct, shall be subject to expulsion by a vote of two-thirds of the members present; but no motion to expel a member shall be acted upon at the same meeting at which it is offered.

ARTICLE V.

The same rule in reference to amendments shall apply to the by-laws as to the Constitution.

Article VI.

The following order of business will be observed:

1. Calling to order.
2. Calling the roll.
3. Reading the minutes of the previous meeting.
4. Reading reports of Secretary and Treasurer.
5. Reception of proposals for fellowship.
6. Balloting for candidates.
7. Reading reports of committees.
8. Unfinished business.
9. Election of officers.
10. Essay and discussion.
11. Appointments for the ensuing year.
12. New business.
13. Annual address.
14. Adjournment.

ARTICLE XLI.

Irritation of the Cardiac Nerves. By M. M. FENNER, M. D., of Jamestown.

Every practitioner is familiar with cases of excited action of the heart that he could not refer to any palpable cause. It is common in one's daily practice to meet with perturbations in the rhythm of this great centre of the circulation, but it is usually not difficult to find the offending cause. In the absence of some organic affection of the heart itself, a deranged stomach may excite unnatural pulsations, through the intimate relation into which the respective organs are brought with each other by the sympathetic system and the eighth pair of nerves. So with deranged conditions of various other organs telegraphically connected with the heart. These phenomenas have been always observed by medical men and appropriately considered. It is not to them that we wish at present to call attention. It is rather with that affection which has been but recently and meagerly described; that affection which may exist independently of any perceptible lesion of structure or function of other organs—to that collection of symptoms (for the disease is known only by its symptoms) that has but recently been referred to the source whence it is now conceived they originate, and which is named *cardiac irritation*, or *irritation of the cardiac nerves*, that it is desired to occupy a little time in presenting to the Society.

Symptoms.

The symptoms of this affection, when it exists in its purity, uninfluenced by derangements of contiguous organs, are not of the greatest urgency. But it is often found in connection with derangement of the stomach or other organs, and gives rise to great anxiety on the part of the patient and his friends. It may come on insidiously while the patient thinks himself enjoying his usual good health, giving rise by degrees to a sensation of presure in the *præcordia*, a feeling of fulness in the chest, or heart, or both at times; or it may, as is more usually the case, supervene upon the subsidence of a convalescence from other diseases, in which case it is more rapid in its course. It is always, so far as

I have observed it, periodical, perhaps, intermittingly so at first. The pulse beats rapid, full and strong, sometimes reaching as high as 140 beats in the minute, but more often about 120. Generally more or less of oppression and pain exist in the chest. Sometimes this is confined to a feeling of oppression simply, and often a sensation of faintness is complained of. Any unusual stir, or the appearance of strange faces will usually increase the rapidity of the pulse, and aggravate all attendant symptoms in a marked manner. So much is this the case that the patient will live in constant dread of hearing or seeing something new. I recollect one case I treated during the summer of 1864, in the person of a young soldier about eighteen years of age. He had been gaining rapidly for a week or more, when he was suddenly set back more than a month by the circumstance of a young lady entering his room unexpectedly one morning to present him with a boquet of flowers. This young man was so sensitive that he would keep on the watch for footsteps, or the sound of voices, during the day, that he might fortify himself gradually against the approach of any one, and so save himself the urgent oppression in breathing that was sure to follow a further rapidity in the pulsations of the heart. It finally became absolutely necessary to extemporize for him a habitation back in the fields, far removed from the thoroughfare of human footsteps.

Also, after a full meal, the taking of stimulating drinks, or any other circumstance calculated to exalt vital action, all the symptoms will become temporarily aggravated. During sleep, on the contrary, the patient becomes comparatively quiet with respect of cardiac pulsations, until the later stages of the disease, when even in this state of repose he shows the sustained cardiac action. What was irregularly periodic in the first stages now becomes a sustained effort.

Thus the disease continues until the sufferer wears himself out by the continued exalted action. He becomes emaciated and effeminate—distressingly sensitive to all external impressions. There seems to be no tendency to spontaneous subsidence of the symptoms and recovery. The disease once established, from whatever cause, seems to be self-sustaining, and continues, although the cause may disappear, until relief is obtained by treatment, or death claims his victim from this alone, or the conjoined effects of this and some supervening disease.

The general health of the patient will generally be found to be more or less affected. When this is the case we should expect more or less of the urgency of the symptoms of the affection to be referable to that circumstance. Every one is familiar with the cardiac phenomena attending and dependent upon a deranged stomach. A glance at the ganglionic system of nerves from which these organs chiefly draw their supply, will readily account for the lively sympathy thus existing. So derangements in the proper quantity and constituency of the circulation readily affect the heart. Other instances might be cited of the manifestation of disturbances of organs through the heart. Indeed, by the older authors, and by most modern authors, excited action of the heart is ascribed solely to some other disease, of which it is looked upon as a symptom. In has no place in the nosological arrangements of authors, and is not included in the tabulated array of diseases adopted by the medical corps of the army, and incorporated into the regulations, of which a soldier may be sick—a circumstance that gave me no little inconvenience in procuring extensions of furlough in the case of the young soldier I treated for this disease, heretofore referred to, and whose case I propose to report in full, further on. In Watson's Practice, I find this reference in point under the head of "irregular action of the heart." He says: "Besides these over-strong or irregular movements, which are symptoms of the disorder of the stomach, and are remedied by correcting that disorder, there are palpitations of a purely nervous kind; I mean they depend upon a peculiar and highly sensitive condition of the nervous system."

But in his treatment he has nothing specific for the disorder—nothing except what is addressed to the correction of other organs, though his confession of the independent character of the affection is sufficiently marked when he goes to the trouble of the following vague remarks in search of a derangement on which the cardiac symptoms my be dependent. He says: "Which condition," meaning the "highly sensitive condition of the nervous system," referred to above, "is itself dependent upon in general a particular state of the vascular system," and goes on to refer it to an anæmic condition of the blood.

In Scudder's Practice "excited action of the heart" is treated of in a section by itself, and referred to as a symtoms of: 1st, derangement of the circulation; 2d, derangements of contiguous viscera, as the stomach; and 3d, irritation of the cardiac nerves.

This keen observer and intensely practical author is entitled to great credit for many valuable observations on the pathology and treatment of this affection through the columns of the Eclectic Medical Journal, of Cincinnati, which he has edited for the past few years, to the great credit of himself and the practical enlightment and benefit of the Eclectic profession. The first hints I received of the true character and treatment of the difficulty of which I am writing were received from his pen.

I have seen the disease in question quite as sustained in character, though not so demonstrative in manifestation, in a patient of a good appetite, clean, healthy looking tongue, regular bowels and neither anæmic or plethoric. And this is that condition of the system in which the affection has heretofore proved most difficult to account for and treat. It compels the abandonment of *general medication*, or the *direction of medicine to some particular organ*, thought to have rebelled from an orderly performance of its functions. It gives no hope of relief from such treatment, and points to specific medicines or the abandonment of the case. So long as a furred tongue, bad appetite, costive bowels or other disturbing cause of the general system existed, the practitioner has had some point left him upon which to direct his remedies. But when all these physical enemies are wanting, or having been present have been dispersed, and the cardiac excitement still continued, unabated and sustained, the skill of the practitioner has generally been thought exhausted, and the patient given over to be dealt with by nature alone, for an "incurable heart disease," or some "undetectable organic affection of the heart, of which the patient is liable to die at any moment."

Pathology.

The pathology of this disease, as its name implies, is to be referred to an irritation of the cardiac nerves, either in their ramifications, or more probably in their ganglionic centres. Nothing has been learned by post mortem dissections, to throw light upon it. I have never had a case die of it, and so have had no opportunity for autopsical investigations. Nor is it at all certain that the irritation is of such a structural character as to be cognizable. The disease may certainly exist, as I have seen it, when all the functions, save those of the heart only, were, to all appearances well performed. May it not rather be with this affection, as with epilepsy—produced by concentric causes,—that it is an irritation

of the nervous centres, not less a local disease than if they were characterized by what results from that higher grade of action termed inflammation, viz.: redness and thickening? In both diseases referred to, the lesions of the nerve centres, whatever the conditions of them may be, are only inferred from the manifestations of the organs they control.

Causes.

The causes which give rise to this irritation are numerous. Any circumstances calculated to produce great temporary excitation of the cardiac nerves, as manifested through an increase of the strength and rapidity of the pulsations of the heart; or any conditions giving rise to impairment of the integrity of nerve tissue, may be set down as immediate causes of this disease. But it will be necessary to admit a pre-exisiting disposition or susceptibility of the affected nerves, either hereditary or acquired, to take on irritation, as a proximate cause; as such circumstances of excitation or nervous impairment are by no means invariably followed by this result. When the disease becomes once established, the causes may altogether cease to operate and yet it prove self-sustaining. Allow the causes to operate, as a foul stomach to supervene, and they aggravate it; remove them, and the symptoms moderate, but the disease may yet continue. A disordered stomach, from the profuse nervous connections, is one of the most frequent exciting causes, as it is also a most common cause of aggravation, after the disease becomes fully established; sexual abuses produce an impairment of the nerve tissue that favors the assumption of the disease. Persons of high degree of sensibility are most liable to become affected, though I have seen a bad case of it in a lady of bilious temperament, thick skin, and obtuse sensibility.

Diagnosis.

The disease has to be diagnosed inferentially. It cannot be seen, but is known to exist only by the manifestation of the organ controlled by those nerves, viz.: the heart; taken in connection with all the circumstances attending the case. Palpitation of the heart of a sustained character will point to investigation. If no organic disease of the heart exist, and if, also, the stomach and other viscera are performing their functions acceptably, then it may be set down that the symptoms point out the disease under consideration. If, however, it is found that there is a faulty action of the stomach or other organs, it will be impossible to say how

far the excited pulsations are dependent on such circumstances till they are corrected.

Prognosis.

This may be set down as favorable in all cases, so far as the disease itself is concerned.

Treatment.

The treatment of this affection is simple as it is effective. There are two principal indications to be met. 1st. Remove the cause of the disease if it still exist, and correct any derangement of organs in close nervous relation with the heart. 2d. Exhibit specific medicine, to allay, permanently, the existing irritation of the cardiac nerves.

With reference to the first indication, if it shall be found that the disease depends upon an impoverished state of the blood, that fault should be corrected by the proper administration of the bitter tonics and iron. This accomplished, the cause will be removed, and if the disease has not already become self-sustaining, the result will be absolute recovery. So, with reference to deranged conditions of the stomach, and nervous debility resulting from sexual abuse. They must be removed by appropriate treatment. The cardiac excitement will thus always become moderated, and if too much time has not elapsed, a radical cure may be effected. And, generally, any fault in the functions of any organ should be corrected, and the system thus brought into as healthy a condition as possible. The means for effecting these ends are numerous and varied, and will readily suggest themselves to the intelligent practitioner.

The second indication is met by the exhibition of specific medicines. Several have been recently brought forward for the relief of this irritation, and are accompanied with such testimonials in their behalf as entitle them to the confidence of the profession. Among these, the *Cactus Grandiflorus* in the form of tincture, the dose being from ten to twenty drops, three or four times a day. I have not yet employed this agent sufficiently to enable me to speak of the value of its curative powers from experience. *Pulsatilla*, *Collinsonia*, and *Lobelia*, in non-nauseating doses, are also claimed to possess specific powers over cardiac irritation. I have tried as yet only the *Collinsonia*, not having had occasion to go beyond this agent for the relief of the affection. In every instance

in which I have used it, my prescription for the past year and a half has been as follows:

R. Ess. Tinct. Collinsonia,
Syrup Orange Peel (of each), oz. iv.
Mix. Teaspoonful every few hours.

This prescription is as miraculously effective as it is extremely simple. It is pleasant to take, and improvement follows its use almost immediately. The periodical spells of faintness and oppression become less frequent, and finally subside, and the prolonged cardiac strain gradually lessens, as is indicated by the softened and returned normal action of the pulse, which rapidly assumes its force and frequency. The Collinsonia possesses stimulating, tonic, and stomachic properties in a marked degree, and so becomes an excellent agent with which to fulfill the first indication in the treatment of this disease, when it is complicated with, or dependent upon, a torpid or dyspeptic condition of the stomach. Its exhibition need not be delayed till after other abnormal conditions of the system are corrected, but it may be commenced at once and given along in connection with other medicines indicated by any complications that may be present. Out of quite a number of cases treated and cured, I have selected two somewhat aggravated ones to report:

July 24th, 1868. Was called to see Josiah W. Kiniston, of Frewsburg, æt. 18. He was a soldier belonging to the 112th N. Y. Infantry; but, on being enlisted, was soon sent to the hospital, where he was treated for a time, and then sent home, with a recommendation that he be discharged the service of the U. S., on the ground that he had an incurable disease of the heart. He had been sick about two months before I saw him, and been treated and given up by several allopathic physicians. He was of a slight, feminine frame, and did not leave his bed. His tongue was clean, his appetite good, his bowels regular, no headache, and slept quite well at night. His pulse steadily about 140 per minute during the day, and a trifle less at night. Had occasional attacks of syncope, fulness of the chest, accompanied by difficult breathing, which alarmed him very much. These were brought on by the slightest circumstance that excited him. Had some pain through his chest, but his lungs seemed to be sound. I diagnosed it as a case of "*excited action of the heart*," and reported it as such, which did not seem satisfactory to the medical officers of

the army, and I was finally obliged to get the interposition of our member of Congress, the Hon. R. E. Fenton, to keep my patient right on the rolls.

I commenced this treatment as follows:

℞ Tr. Veratrum Viride,
Tr. Aconite (of each), dr. i.
M.

Give two drops in water every hour.

Apply an irritating plaster to chest, and give a pill half an hour before each meal, and at bed-time, composed as follows:

℞ Alc. Ext. Nux Vomica,
Podophyllin (of each), grs. viij.
Hydrastin,
Quinia Sulph. (of each), dr. i.
M. Ft. Pill lx.

A salt-water bath, followed by friction, was directed to be repeated daily, and use the following:

℞ Hypophosphite Lime, oz. i.
do Soda,
do Iron (of each), drs. ij.
Fl. Ext. Cinchona,
do Asclepias,
do Prunus (of each), oz. ij.
Best Gin, oz. x.
Ext. Vanilla, oz. ss.
Simple syrup, Oj.
M. Ft. sol.

Dose, one tablespoonful four times a day.

This treament I continued about two months, increasing the sedative to six drops per hour, after the first five weeks. The only perceptible change produced was an improvement in breathing. The cardiac symptoms continued unabated. The various functions of the body continued to be well performed. I then changed the formula for the Comp. Syrup of Hypophosphite, so that it contained oz. ij. of Ess. Tr. Collinsonia to the Oj. The patient then began to improve rapidly; he was kept on the syrup. His recovery was complete, and he remains in good health to this day.

Case II.—Mrs. —— Morrison, æt. 72; bilious temperament. Has had the disease several times during her life. Generally of

good health; was called to her August 5, 1866. Had been under treatment of an eminent allopathic physician of Randolph for two months, and had been pronounced incurable. Her attending physician had repeatedly said there was no help for her. Pulse very strong, 128 per minute, and intermittent. Suffered greatly from attacks of dyspnœa. Obtuse to external impressions, and so was easily excited. Too weak to turn in bed. Bowels moving three or four times a day from medicine she had taken. Some scalding of urine. Tongue somewhat angry. Some tenderness over the stomach. Appetite poor. Extremely emaciated.

Treatment.—The treatment in this case consisted of—

R.	Ess. Tin. Collinsonia,	
	Syrup Orange Peel (of each),	oz. iv.
M.	Teapoonful once in four hours.	
	Liquor Bismuth,	oz. viij.

Teaspoonful every four hours.

Irritating plaster over the chest and stomach alternately. Saline bath, with friction over the spine once a day.

Aug. 10.—Pulse regular, and about 110 per minute; breathing easy; has but few spells of oppression; urine scalding, and diarrhœa.

Treatment.—Continue same, and add:

R.	S. Morphine,	grs. i.
	Pulv. G. Camphor,	grs. iv.
	Tannin,	grs. ij.
	Sach. Alb.,	q. s.
	Trit.; div. in chart No.	viij.
M.		

Take one every four hours for diarrhœa. Use nitre for scalding of urine.

Aug. 21.—Comfortable; appetite good; no unpleasant or disturbing symptoms; pulse regular, and about 80 per minute. Has been sitting some each day. Discontinue all but the Collinsonia.

Sept. 1.—Has gained strength, and is now about the house; discharged her with directions to continue her medicines for a month longer.

ARTICLE XLII.

Address delivered before the Eclectic Medical Society of the Thirty-second District, State of New York, May 15, 1867. By M. M. Fenner, M. D.

ADVANCEMENT OF THE SCIENCES—THEIR COST—ECLECTICISM.

Mr. President, Gentlemen of the Society: Man is essentially a progressive being. He contains within himself the elements of greatness, and their development involves consideration of labor and time. It was not thought good by the great author of existence to endow him with a constitution at once competent to grasp an understanding of the plan and workings of the universe. He saw fit rather to impress him only with the germs of intelligence, wherewith he might through toil, time and sufferance solve for himself the mysteries of his being, and the workings of the natural laws by which he is affected and governed.

In the mental development of the human race, the early generations represent to us its infancy; and the generation of the present day must be taken to represent an advance in the progressive development reaching toward completion, as far as the sum total of the wisdom and accumulated knowledge of to-day exceeds the almost total ignorance of the pristine ages. And in this unfolding and development of the human mind, its present state is to absolute completion or ripe manhood, as the accumulated wisdom and knowledge of the times are to the sum total of all wisdom and knowledge, or absolute infinity. Thus man, truly such *physically*, is *not* man as yet *morally* and *intellectually*. In the onward progress toward ripe manhood, or full development of mind, he must be considered as yet in the childhood or youth of his existence.

Down to the present time, however, a progress has been made in human wisdom and knowledge which, contemplated in the light of the nineteenth century, is of passing grandeur and extent. Six thousand years of development, involving toil, sufferance and persecution, have wrought their effect. Man's physical comforts have have been augmented, his mind unfolded and expanded, his faith rationalized and unfettered. His wants have increased from the simplicity of the barbarian to the manifold and complicated re-

quirements of a Christian Civilization; and his unfolding capacity has found means to afford ample supply.

Once the husbandman was content with the spade or wooden plow with which to prepare his soil for the seed, the sickle to reap his harvest. The corn he grew, the flesh and milk supplied by his herds, satisfied his scanty board. The leaves of the forest, and unreclaimed skins of animals covered his nakedness. To-day he glories in the plow and reaper, and the manifold labor saving implements of husbandry. The products of every soil and clime grace his table, and the rich and varied fabrics from the looms of every nation contribute to his raiment.

Once the trader was obliged to content himself with the transporting foreign wares by caravans across vast arid plains and sandy deserts at the risk of untold suffering from thirst and fatigue, if indeed he was so fortunate as to escape utter ruin and death by the ruthless sweep of the fatal simoom. These he exchanged for home products of industry. From a nucleus *so* small has sprung the mighty commerce aud traffic of the present era; an immense steamship navigation, and steam land transportation, whose sails thickly dot with white the surface of nearly every ocean; whose smoke wafts across rich and productive plains, or curl above the massive forests that border the rivers of the earth, and whose engines leap across nearly every country of the globe, enable him to command at his ease and security the wares, fabrics and productions of every country and clime, and improved international law enable him to exchange them for currency having a known value throughout the civilized world.

Religion, once confused with beliefs in false deities and false doctrines, and enforced by the power of the state, obscured benighted and oppressed the minds of the people. To-day notions respecting the great Author of existence, and the duties and obligations due to Him by man are rationalized to correspond with the advanced wisdom of the age, and their appropriate observance left to enlightened teaching and conscience. Diverse opinions are honestly entertained and belief in them is tolerated. Conscience is no longer sought to be regulated by the power of the state.

Philosophic vagaries respecting the flatness of the earth's surface; the canopy of heaven resting upon it, supported by its sea-girt disc; the earth itself resting upon and supported by monsters beneath, illumined by the sun which moves over it daily, "impelled by celestial energies," have yielded step by step to philo-

sophic truths ascertained by positive investigation respecting the rotundity of the earth's surface, its diurnal and annual motions, the distribution of the watery element and its relations to the sun, moon and planets.

Civil government, too, has advanced from that revered old patriarchal system in which the venerable sire dictated laws to the various branches of his family till his voice was silent in death, to that more ennobling republican system under which the people themselves make the laws, and choose the rulers by whom they are governed.

And the arts of sculpture, painting, music, poetry, architecture, the drama, printing, photography and oratory have sprung up one after another and developed to a perfection beyond which, in the present state of knowledge, little seems desired.

Professions are established and dignified.

Laws, enacted by the people and taught by earnest and able advocates, are administered in justice and humanity.

During one seventh of the time, man's spiritual welfare is taught by able ministers of God's holy laws from pulpits which thickly dot the face of every civilized land.

And medicine, whose kindly office it is to smooth the rough pathway of life, by binding up the shattered and broken frame, administering to bodily ills, and correcting those physical and mental aberrations of health, which man, by disobedience of the laws of his being brings upon himself, has made advances and gained a development which calls for the lasting gratitude of mankind. However imperfect it now may be as a science, the accumulated knowledge possessed by it at the present day is such as to give it *position*, and to form for it at least a grand and immovable foundation upon which may be superimposed, without fear of its crumbling away, the various contributions and advancements that may be achieved by the present and future generations. Once carried on in utter ignorance of every branch of the science, and administered by the aid of sorcery and incantation, it is to-day well grounded in its principles, rational systems and efficient means founded on facts and experience are in use, and human suffering, once thought unavoidable and incurable, is reft of its terrors and the sufferer restored again to the happiness of his existence.

Thus has been enumerated, and in some degree by contrast their extent portrayed, some of the advancements made in human knowledge down to the present era. While the vastness of the

extent of these advancements is such as to excite our wonder and challenge our admiration, it also has for us its lesson. Progress in science is too plainly impressed to be ignored. It is given us as a watchword to nail to the masthead of our noble system of Eclecticism, and which, pursued with a proper devotion and zeal, will lead us on to the attainment of developments and results yet more wonderful and important. Judging from the relation existing between the past and the present, what may we not hope for the future? With the difference between what *was* and what *is* for our guide, what may we not expect *to be?* Yet six thousand years in time have been needed to attain this much. It has been attained *not always* by simple investigation, discovery and announcement of truths. Time-serving self-interest, self-conceit and prejudice, those fearful barriers to the uufolding of human genius, shown in our day through sophistry and the shafts of ridicule, but once asserted by the violence of the animal passions, have had to be overcome. While man is a progressive being he is also full of bigotry and prejudice. He possesses an overweening affection for institutions and opinions to which he has become committed, which bear the sanction of age, and which the intelligence he possesses has not taught him is erroneous. Proud and self-conceited also, he refuses disdainfully to accede to the dictates of candor and sober judgments, when they oppose themselves to the principles to which he has given in his adherence, and in whose support he has given his influence. In this state of mind he has an aversion to impartial investigation into things time-honored and staid. The members of human society develop in unequal proportion. Every society numbers among its adult members every variety of mental development, from that degree almost representing infancy, to the riper attainments of the sage. Leading and liberal spirits are the first to discover and introduce new truths. Their lights are seen but dimly, if at all, by the mass of commoner minds, and hence they encounter the bigotry and prejudice of the age, and have, indeed, in ages past, too often been made the objects of the most cruel vengeance human genius could devise, for the very offences which, viewed by the advanced light and liberality of after generations, were approved by a grateful posterity, and erected into a monument by which to commemorate their greatness and philanthropy. To such a condition of society has ever, to a greater or less extent, been due a disposition to retard the progress of science and of intellectual development.

The most enlightened minds have been ridiculed, scorned, jeered at, denounced and persecuted as innovators and unsettlers of societies and systems while living, and their light and labors have only been seen and acknowledged by the increased development of mind of after generations. Every new truth introduced to the notice of mankind has been contested, not always simply by that healthy ordeal of criticism which obtains chiefly at the present day, but in innumerable instances it has been obliged to assert itself at the expense of ridicule, persecution, bloodshed. Bigotry and intolerance have been formidable adversaries to the advancement of science. It has had to struggle through the ignorance of past ages at great cost of labor and life. Measurably incompetent to investigate and determine the truth, and too arrogant and conceited to acknowledge it when known, ignorance and superstition have ever made war upon whatever bore the semblance of novelty or had not the sanction of age.

Thus, more than two thousand years ago, good old Socrates, philosopher and sage, already tottering on the verge of the grave from the infirmities of his old age was compelled to drink the fatal cup of hemlock, because he disbelieved in the gods the state believed, because he introduced new divinities, and because he sought to teach the youth of Athens the just principles of aesthetical philosophy. His cotemporaries Anaxagoras and Æschylus, both men of culture and liberal ideas, were condemned to death for the crime of being in advance of the public sentiment of the age. Plato, too, was obliged to dissemble his real beliefs respecting religion, philosophy and law, and with his great mind pander to the ignorance of the multitude, while Aristotle, the accomplished tutor and friend of Alexander the Great, after that monarch's death, was compelled to flee his native country to save himself from the fate of Socrates who had gone before, and drag out the remnant of his old age an exile in a foreign land. Nearly fifteen hundred years ago Nestorius, patriarch and bishop of Constantinople, was found guilty of a high crime by the great council of Ephesus, in that he had taught it as his belief that the virgin Mary was not the mother of God. For this high crime of exercising the freedom of conscience he was reduced from his clerical preferment and condemned to banishment beyond the seas. Public opinion was in such a state as to justify the compelling of any person to believe what the majority of the people accepted as their belief. Men of letters everywhere felt obliged to burn their libraries, fearing that

some line therein contained might be found that would savor of heresy to the ignorant and superstitious, and thus bring down upon their heads inexorable punishment. It is a little more than three hundred years since a bold and youthful man of God thought he discovered errors in the established church usages, and corrupt practices in the administration of the gospel of Truth. This youthful minister was Martin Luther. With an honesty that could not be defied, and a will that could not be overcome, he set himself to work to correct these abuses, purify religion, and thus aid the cause of man's obligation to his Maker by his mighty genius, and reclaim it from the slough it had been sinking into for ages past. He was violently set upon by those whose duty called them to second his endeavors, denounced, ordered to trial, censured, excommunicated and only kept from the stake by his powerful friends and his own shrewdness and celerity. Thousands of his followers and others of the reformation in religion, less fortunate, paid the most agonizing penalty that could be devised by bigotry and superstition, for the sake of their opinions and consciences. The brilliant mathematician and astronomer, Galileo, who taught the theory the great Copernicus had demonstrated more than a century before him, embracing the actual movements of the earth and planetary system, was drawn into heated controversies, assailed for heresy because he could not be disproved, compelled to "abjure and curse" the truths he had taught, and spend his old age in confinement, a prisoner of state. Sir Richard Arkwright, whose genius has perhaps done more for the commercial and manufacturing interests of the world than that of any other man who ever lived, in his invention of the great labor-saving machinery in the spinning of cotton, was obliged to quit Nottingham to save himself from the violence of the operatives opposed to the introduction into use of his great invention; and his after life was embittered by controversies and broils into which he was drawn by interests seeking to deprive him of the glory and emoluments due to his towering genius. The science of metaphysics has been the cause of abtruse speculations and angry controversies among the greatest intellects of every age. Yet the *real science of the mind*, however acutely written upon, and covered up with the ostentatious theories and learned and scientific distinction of authors, was enveloped in mystery impenetrable to any proper understanding of the subject till Gall, by his simple and beautifully grand inductive philosophy brought for-

ward the system of phrenology. It was his good fortune, happily, to live in an age beyond the more violent physical persecutions, else another great name would doubtless have been added to the list of the "Martyrs of Science." His theory and facts have been violently assailed from the pens of the most eminent men of every calling in life, and his disciples have often encountered the prejudices of the multitude by the indignities of jeers and unsavory eggs. Yet phrenology stands to-day the only intelligible system of mental philosophy, too firmly implanted in the convictions and affections of the world to be successfully assaulted. The magnificent steam navigation of the present day, permitting intercourse and commerce among the remotest nations of the earth with entire facility, ease and luxury, stands as the representative of the genius of Robert Fulton, who tremblingly launched the "Clermont" on the waters of the North river in 1807 and diligently worked her into running order amid the earnest protestation of his friends, and the sneers of the unthinking crowd. So good old Franklin felt constrained to conceal his grand conception of drawing lightning from a thunder cloud and confining it in a bottle at will, till by actual experiment his idea had been reduced to a fixed fact—that he might thereby avoid the sneers he knew, too well, an unthinking community would cast upon him for such presumption. And the fathers of the American republic, whose foresight conceived and whose energy and zeal achieved the free government under which we live, long since accorded the leading place among the nations of the earth in the onward development of man, had to deal with an unpopular idea, and stem the tide of the prejudice of the world. They were the sneer of the aristocracy of the mother country and the butt of jokes throughout all the courts of civilized Europe.

Allusion has been made to these historical facts, gentlemen, for the sake of the lesson they inculcate. Human advancement is slow but steady. Leading spirits who go out in advance of the commonly received doctrines of the times, encounter the prejudices of the great mass of society, who are not sufficiently advanced to comprehend the truths thus brought forward. In his "Genius of Solitude" Alger beautifully and truthfully says of men in advance of their age:

"A majority of the noblest geniuses who have conferred the greatest benefits on mankind, have been spit upon or gnashed at and banned by the dominant class of their cotemporaries. Prophets, discoverers, inventors, martyrs, illustrious company gathered from

many times and countries, and associated in one fellowship of sublime genius, heroic devotion, and tragic fate—history has nothing left of equal pathos to reveal when it has shown us these men, dreaded, despised, persecuted, outcast, flying, appealing to after generations to do them the justice so cruelly denied in their own. Nor has posterity proved recreant to the holy trust. They are revered and celebrated now with an enthusiasm in strange contrast with the obloquy they suffered when alive. And to enter into sympathy with them is an inexpressible comfort to those who in later times are called to a kindred experience. As Heine says: 'An equally great man sees his predecessors far more significantly than others can. From a single spark of the traces of their earthly glory he recognizes their most secret act; from a single word left behind he penetrates every fold of their hearts; and thus the great men of all times live in a mystical brotherhood. Across long centuries they bow to each other, and gaze on each other with significant glances, and their eyes meet over the graves of buried races whom they have thrust aside between, and they understand and love each other.' It is delightfull to notice the geniality with which, in his Cosmos, the grand old Humboldt recognizes his great predecessors in the enterprise of surveying the universe as a whole—Strabo, Eratosthenes, Ptolemy, Hipparchus, Galen, Aristotle, Lucretius, the elder Pliny, Albertus, Roger Bacon, Galileo, Copernicus, Newton and the rest—with what joy and pity he signalizes from a height like their own, these intellectual peaks looming in clouds and stars athwart the historic table-land of science. The picture, in the New Testament of Jesus on the Mount of Transfiguration in converse with Moses and Elias, is a beautiful symbol of the fellowship of the highest kindred spirits in all ages."

Existing institutions are always in the management of men who, though they may see the error of their ways, and comprehend the truth of the professed changes, yet are interested in the old by preferment or emolument that would cease to inure to them by radical changes. Hence they cry out against *innovation*, work upon the ignorance and prejudice of the masses, exciting them to the ridicule and persecution of the object of their fear, and of their hatred. And thus many truths and principles that now constitute the very foundation of the sciences, arts and politics, have been introduced at the expense of torture and death to their discoverers and disciples. Happily, however, light and knowlege have stead-

ily advanced upon the darkness and ignorance of the past ages. We have fallen upon better times. The torch and faggot and their less shocking attendants, have gradually yielded to the solid investigation and wordy criticisms of the present day.

Such being the condition of human nature, it would be expected that medicine and surgery, in their progress from the ignorance and vagaries pertaining to them in the earlier ages, toward the positive knowledge possessed at the present time, would encounter the opposition to advancement that has been offered to other branches of science. Analogy does not deceive us in this instance, in the correctness of our conclusion. The noble science of medicine has in all ages been thus obstructed in its advancements. The peculiar difficulties in the way of arriving at absolute facts, incident to the various branches of the science, have rendered it in a special manner liable to the obstructions of dogmas, theories and prejudices. And much needed information pertaining to the science is yet in obscurity, notwithstanding it has commanded much of the best talent of every age, in its various departments, for their elucidation.

The first important discovery of an absolute fact in physiology was that of the circulation of the blood, made by Dr. William Harvey, which was announced from his chair of anatomy and surgery in the London Royal College of Physicians in the year 1616. Doctor Harvey possessed great learning in his branches of the science of medicine, and was led to this discovery by the most beautiful system of inductive investigation. He had its facts demonstrated beyond question of doubt before he gave his announcement to the profession. Yet he was violently set upon by the medical faculty, his discovery denied, shown to be fallacious, impossible and foolish, to the satisfaction of his opponents. He was drawn into embittered controversies in which his theory was denied, ridiculed and denounced, and much of the remainder of his life was rendered unhappy by the ignorance, intolerance and malignity of his professional brethren. Not satisfied with this persecution of the great discoverer while living, an attempt was made subsequent to his decease, and after his philosophy was accepted as correct, to rob his great name of the glory of his genius, by asserting priority of discovery, as found in the vague writings of one Michael Servetus, a Spanish physician, and others. In a similar spirit of cold unfriendliness was met the important contribution of Edward

Jenner, nearly two hundred years later. By much patient research and self-sacrifice he rendered available to community the fact that small-pox, one of the then great scourges of the human race, could be deprived of its terrors by vaccination. His biography says of him: "It is melancholy to be obliged to state that Jenner's life was embittered by the controversies to which his discovery led, and that an amiable, a virtuous and an accomplished man was disturbed by petty squabbles to which his nature was utterly abhorrent."

Few medical philosopers have suffered that extreme martyrdom that has attached during various periods of the world's history to men of other branches of doctrine, or science. Fortunately for the great leading spirits, the truths brought forward have occurred at a time after such martyrdom was tolerated, or their nature was not such as to seriously convulse the public mind.

Forty years ago the condition of medicine and surgery was anything other than what might have been desired. Its rolls gloried in the names of many of the most eminent men of all past ages, who had devoted their lives to its culture, and bequeathed to the profession a record of their contributions. Its literature and embodied attainments were voluminous and imposing. Its solid facts in many of the more absolute branches of the science were developed exhaustively, or nearly so, and arranged with great learning and method according to the nicest dictates of science. Yet, in its practical application to the relief of the "ills of human flesh," it was a notable and deplorable failure! Its attempts to reduce its accumulated lore to the alleviation of human suffering were futile—often murderous! Disease was regarded more in the light of an evil spirit pervading the body, which should be attacked in a violent way and routed from its citadel by potent and destructive agencies, rather than in its true light and nature. To this end the veins were opened and the life and energy of the patient were abstracted; drugs were administered to impoverish and liquify the remaining blood; and to complete the work of destruction strict starvation was enjoined. Disease was thus rendered less demonstrative in its manifestations, which result was hailed as a partial rout of the infective enemy, and the attacks were renewed and repeated with the hope of wholly expelling him from his fastness; the principle question involved in the prognosis being as to whether the patient's strength of constitution was sufficient to hold out till the expulsion could be effected, after which a

recovery might be looked for. It is a significant fact that might be expected to have some bearing on the value of this mode of medication, that the expulsion of disease and death of patient were often contemporaneous events; but such a way of viewing the subject seems never to have occurred to the profession. Such was a principal theory upon which the medical profession seem to have based their active measures of treatment for long ages, and with what success let the bills of mortality which accompanied it attest. However ostentatious the learning of the profession, however voluminous its facts, and accurate its descriptions in anatomy, chemistry, materia medica and pathological anatomy; when applied to therapeutics under the guidance of such erroneous theories respecting the general pathology of disease, and unsupported by the curative vegetable agencies that grace the materia medica of our day, it converted the medical faculty into a greater scourge of mankind than pestilence and famine, aye, and war and intemperance combined. While it is now known that more than eighty per cent of the patients of all diseases combined will recover if left alone to the unaided resources of nature, bills of mortality, under the scientific treatment of physicians as then administered, show a per cent of deaths varying from two-fifths to three-fourths of the whole number of patients treated. In the light of such facts, the dread of the physician, and the various bloody caricatures invented concerning him and his bloody vocation, are little to be wondered at or regretted. About this period a reform was beginning to be inaugurated in America, not *within* the profession, or *by* the profession, but by the people. It was not in harmony with their democratic spirit and their strong common sense, to tamely submit to the imposition of a treatment that yielded such discouraging results. Scientific medical treatment from learned physicians had become a thing simply intolerable. To send for the doctor savored more of the necessity for a will and preparation for a funeral than it did of a recovery to health. The fevered patient saw in his dreams only apparitions of a blood-thirsty doctor, lance in hand, ready "to seize upon the favorable moment," grasping for his emaciate arm from which to let trickle away his little remaining life blood and shouted: "Back—away from me!" in his delirious ravings. Patients thus refusing the services of the medical man were found to recover from their illness, and often more certainly and speedily, and less impaired in constitution than others receiving such attendance. Warm baths and warm teas

were found to give relief of pain and to mitigate urgent symptoms. Many points of nursing, accompanied by the exhibition of soothing and harmless decoctions of herbs were found of great service in domestic use.

People untaught in the learning of the schools, seeing the superiority of domestic measures over scientific treatment, gave themselves to the business of caring for such patients as refused regular treatment, and though held in contemptuous disregard by the haughty school men, their labors, unskilled and inartistic as they were, became notoriously more successful than their learned despisers in the management of many diseases. This movement, invited and even forced upon society, by the notorious inefficiency for good of the profession, received the favor of many people, gradually became organized into various sects with men of more or less ability at their heads, as he Thompsonian, headed by Dr. Samuel Thompson, and Botanic medicine, headed by Dr. Wooster Beach. But it was not until the year 1845 that a thorough and permanent organization of reform medicine was effected in Cincinnati. under the auspices of such able and enterprising leaders as Professors T. V. Morrow, L. E. Jones and others, whom it had pleased Providence to raise up and place in the reform ranks. A broad platform of medical principles was here adopted; the term *Eclectic* chosen as the appropriate designation of the *Reform School*, and the *Eclectic Medical Institute*, the great *alma mater* of reform medicine, established.

In the organization of the *Eclectic Medical Profession*, and the establishment of the *Eclectic Medical Institute* of Cincinnati, it was thought by able men—men who had been educated at the regular medical colleges, but seeing the wonderful superiority of reform treatment of disease, had thrown off the shackles of prejudice and embraced its system of practice—to build up a young and energetic American school of medicine in consonance with the spirit and stage of progress of American institutions; one that should be alive to the requirements of the times, that should throw off the lumbering and repugnant aristocracy of the European schools, as well as of their offspring, the then existing schools of America, which were wholly imported institutions, in spirit and in letter; one that should not disdain to acquire knowledge of valuable facts and experience from the lowest sources, at the same time that it should aspire to the highest; one that should not be puffed up with self-conceit; one that should not be bowed down and op-

pressed by the adoption, unquestioned, of all the accumulated dogmas of the past; one, in fine, that should court investigation and demonstration in medicine as in other branches in science; have progress, advancement as its motto, and seek to explore the vast, rich and varied vegetable kingdom indigenous to the land. It was sought to adopt and combine the learning of the schools, as far as that learning was absolute, in the branches of Anatomy, Chemistry, Physiology, Pathological Anatomy, Obstetrics, Surgery, and Materia Medica, with the reform General Pathology, Materia Medica, and Practice of Medicine or Therapeutics. It was sought to investigate, sift out and incorporate from the old into the new, as well as to go into fields yet unexplored, and make them contribute of their abundance to the perfection of the system.

They sought also to stir into activity a profession puffed up with ostentatious learning and lazily settled into a routine-practice, that yearly wrecked more constitutions and carried more people to untimely graves than all the evils of war, pestilence and famine combined. They sought to stay the reckless career of red-handed scientific murder. Satiate with scholastic learning, self-conceited beyond hope of redemption, it was an impossibility to teach the profession reforms. The old adage that "None are so blind as they who will not see," is as true as it is old. The examples of the great Harvey and Jenner, and other great names who had gone before them held out little inducement to begin a labor of that kind within the profession. It was therefore sought to force the profession from their heroic and sanguinary measures of human destruction, by teaching the people that all the "ills of the flesh" could be managed successfully by gentle sanative measures, and thus compel them to desist from the use of their pernicious agencies, by lack of victims.

Twenty-two years ago, therefore, the Eclectic or American system of Medicine organized upon the following broad platform of principles:

"1. We deny the papal infallibility of the profession.

"2. We deny that it is impossible to produce satisfactory results without the lancet.

"3. We deny that mercurials are ever necessary.

"4. We deny the propriety of using any injurious remedies.

"5. We deny that a physician should be allowed to lose more than two per cent.

"6. We deny that we know enough about the materia medica.

"7. We deny that the functions of the brain should be omitted in our systems of physiology.

"8. We deny that physicians should be the last to learn new truths."

What has been the result thus far? What has Eclectic or Reform medicine accomplished? What has been its influence on the old system of practice? What upon society?

Its investigations in physiology have developed truths with reference to the action of the brain, and with reference to the human temperaments, that have taken a first place in science, and form bases for important alterations in the practice of medicine, as well as the habits and customs of society.

Its investigations in general pathology have demonstrated the important fact that *disease is not an entity per se*, not *a thing foreign to the system*, that by some chance means has entered it, and must by strong and noxious drugs and heroic means be driven out. It is rather a *condition of the system*, or a portion of it. As seen by the observer it is *but the manifestation of an effort* the system by its nature or its constitution puts forth for the repairs of injuries done to its tissues. These injuries are either *apparent*, following upon accident, or they are *occult*, invading the system through the blood into which they have been introduced along with the atmospheric air we breathe, as in the case of zymotic diseases and the exanthemata. And the rational treatment adopted is simple, as it is strictly scientific and gratifyingly successful. The physician is called upon to *support* the system and maintain it in its integrity, instead of *tearing it down, as of old*, and aid nature in the work of repair and restoration to health in her own way, instead of "kicking nature out of doors," and substituting pernicious agencies devised by man in her stead, as the old system of practice would have us do.

It has demonstrated, and every day continues to demonstrate to the world in actual practice, that by its judicious system of medication, based upon its improved system of pathology of disease, and aided by its numerous new remedies which have been discovered and brought into use principally from the vegetable kingdom, only a trifling per cent of patients suffering from acute diseases need fall victims to an untimely death, and that much acute suffering, and many chronic ailments rendering life uncertain and painful, and once thought unavoidable, may be radically healed,

and the sufferer restored to the enjoyment of his natural existence.

To aid in the accomplishment of these results, it has introduced into its Materia Medica upwards of fifty new remedies, before unknown or unused by the profession, and substituted them for the poisonous drugs heretofore in use. Many of these new remedies are of the utmost importance in the proper management of disease. It has abandoned all the heroic and pernicious drugs and measures of the old system; as mercury, lead, arsenic, tartar-emetic and the lancet. and uses nothing positively hurtful to the human constitution in the treatment of disease, so that if, perchance, failure to cure attend a given case, it is not, at least, made worse for the undertaking. No wrecks of humanity stalk about as the results of Eclectic treatment.

It has had the effect to force old school practice from many of its sinful ways. Who now-a-days hears of a patient being bled? Where has mercury been used to salivation of late? Who has seen the bloated faces and suffused eyes resulting from the lavish exhibition of arsenic? Formerly these appalling results met the eye at every corner of the street. Scarcely anywhere can they be found at the present time, save within the secluded wards of the hospital, where dark deeds may be done secure from the condemning public eye. No. Eclectic medicine has taught that destructive measures are *unnecessary* and *pernicious* in the treatment of disease, and the people refuse to be so treated by allopathic physicians. The allopathic profession have therefore been forced to abandon their old treatment of disease by reform medicine, their much-ado cry of "change in the type of disease" to the contrary notwithstanding, or to employ it sparingly and by stealth. They have incorporated many of the valuable remedies brought forward by the reform physicians into their Materica Medica, sometimes giving credit therefor, at others most disingenuously forbearing to make any mention of their origin. Other equally valuable remedies they still stubbornly refuse to recognize. Convinced, perhaps, of their intrinsic worth and value to their trusting, confiding, suffering patients, they yet have doubts concerning the respectability of their origin sufficiently grave to overbalance all considerations of justice, humanity and good policy.

Like the Philadelpia professor who remarked to his class that Lobelia was a medicine ofttimes of the greatest service in the

treatment of disease, but unfortunately it was freely used in the practice of quacks, and he felt obliged to caution them to be chary how they had to do with it! Some of our remedies, however, have never been so loudly praised as by allopathic pens, in allopathic journals and books. Probably more has been written and said to the credit of the one concentrated Eclectic remedy, Podophyllin, by allopathic physicians, in Europe, many of the most liberal minded and able of whom use it freely as a substitute for mercury, having entirely discarded that poisonous drug from their practice, than by the Eclectic branch of the profession itself; and we should hardly exaggerate in saying that tons of the agent have been ordered from our Eclectic manufacturers, to supply the European market. Yet there are hundreds and thousands of allopathic physicians within easy access of these extensive manufactories, in our own country, who have never as yet tested the agent in actual practice, but continue on, as of old, dealing out their Samson doses of calomel and blue mass, so chary are these respectable old gentlemen of tarnishing their good name. Said the late Dr. Ira Warren, of Boston, an allopathic physician of much celebrity, a member of the Old School Massachusetts Medical Society, a man whose family name stands justly at the head of the allopathic branch of the profession in America, and who was much above the mediocrity of his professional brethren in point of attainments, progress and liberality, in a recent edition of his "Household Physician," a work, by the way, that every Eclectic physician should have in his library, respecting Eclectics, their standing, and the value of their labors; and he says so many good things that we quote his entire article, which is brief:

"There is a large and growing class of physicians called at first after the founder of the school, Thomsonians. Subsequently they were generally known as botanic physicians. Now they pass under the title of Eclectics. These men, directing their attention at first chiefly to cayenne and lobelia, have gradually extended their zealous researches over the vegetable kingdom, and have gathered much information worthy to be preserved. These researches have revealed a sadly neglected duty on the part of old school practitioners, and in 1853 drew from the committee on indigenous botany, appointed by the American Medical Association, the confession that our practitioners generally have been extremely ignorant of the medical plants even in their own neighborhoods; and to this fact the committee attributed it that the

Eclectic physicians had in so many instances supplanted the regulars in the confidence of the people. The education of this class of practitioners has gradually risen, year after year, until they have several medical schools where students are well instructed in the principles of medicine by men of real ability. This is particularly true of the school at Cincinnati. They have also a literature of no mean significance, especially in the department of materia medica. This list of remedies they have given to the world, drawn from our home plants, are a boon of no small value. I regard them as equal in value to all we were previously in possession of from the vegetable kingdom. The podophyllin and leptandrin, as substitutes in most cases for mercurials, can hardly be too highly prized. And yet it is mortifying that the remedies which these men have given us are, by hundred of our old school practitioners, not even known by name, and where known, generally not honored with a trial. King's American Eclectic Dispensatory, a work of 1,300 pages, in which they are well described, is almost unknown among us. Aside from the copy in my own library, I do not know that one is owned by any member of the Massachusetts Medical Society of Boston. I consider this a disgrace, for however learned a man may be, he is not fully equipped as a practitioner until he is acquainted with this class of remedies."

Such contributions of valuable knowledge to the profession surely call for courteous acknowledgment and kindly and respectful consideration. It were vain to expect, however, an exception to the general rule. Like all innovations and advancements in science throughout the world's history, the American Eclectic system of medicine could not be permited to take its bold and independent position, and maintain it, without being opposed and denounced. From a lowly origin, the system has slowly but surely risen, step by step, to the attainment of its present growing superiority. The obstructions to its advancement have not been offered by the popular clamors against innovations by the common masses of the people as of old. On the contrary, from them it had its inception, it has ever since, in greater or less degree, had their sympathy and support. The opposition and denunciation have ever come from the old profession, conscious of their infirmities and small deserts, and alarmed at the growing superiority of reform medicine. The same bigotry and arrogance that cast a sneer upon the untaught and inartistic efforts of the early reformers, struggling to supply the wants of a people driven by habitual

bad usage to something, anything to comfort in time of sickness, other than a regular doctor, is reserved for the educated Eclectic of the present day. Ignoring the progressive spirit of the age in which he lives, unshamed that his is the last branch of the profession to introduce, or acknowledge and appropriate new truths, and chafed at the unfavorable comparison the results of his own practice bear with those of the reform physician, the allopath settles himself back upon the respectability of his origin and connection, asserts unblushingly that his is the only learned and time-honored school, and ever and anon endeavors the extinction of what he is pleased to term "medical heresy," by the passage of sage resolves in societies assembled, that it would be unprofessional and degrading, and therefore improper, to recognize any one as a physician not a member in good standing of his own medical sect, or to meet and advise with any such in council in the sick chamber. Here the aristocracy of the science brings itself into full and naked relief. How pitiable and insignificant are made to appear such puerile notions, such "middle age folly," when presented along side of that bold and noble sentiment uttered in a recent philosophical work put forth by one of God's noblemen, who said "Philosophical opinions and scientific discoveries are entitled to be judged of by their truth, not by their relation to existing interests." But this is the mild and more modern way of drawing it. Heated controversies, the shafts of ridicule, denunciation as "quacks," "bad men" and "fools," have all been employed to prejudice the public mind against, and stay the progress of, the reform schools. It was the good fortune of Eclecticism in medicine to be established at a time when the public mind was too enlightened to be influenced to violent persecution. In the dark ages of the world the craftiness of the regular profession would have had little difficulty in so working upon the feelings of the people as to make them tolerate martyrdom to the men who should dare to introduce such radical reforms, as did the popes in wreaking their vengeance upon those guilty of heresy in religion.

But thanks to an enlightened public judgment, it was ripe for the reform. It was already, with its sound common sense, in advance of the self-wise, scholastically learned profession. It invited to and actually inaugurated the movement, by refusing to tolerate longer existing abuses. It has ever supported the reform movement with an affection that the cunning of its opponents could not

swerve It has given to the reform school all the authority of law possessed by the old school, and this notwithstanding the desperate efforts of the regulars to strangle it in its infancy. It has supplied the reform schools with the means of making their physicians the most learned, as well as the most useful physicians in existence. It has given us its influence ; it every day bestows upon us its patronage, and its material aid.

While Eclecticism has thus received the favor and the patronage of the people, it has shown itself every way worthy. It has ever been a boon and a comfort to the sick. It never tires in its kindly offices of mitigating human suffering and healing disease. Aside from its direct labors in doing battle against disease, it has had the influence to stay the ravages of old school practice. It has converted it from a man-slaughtering system of practice into one preservative, we trust, to some extent at least, and imperfectly, it may be, of human life.

Urged on by allopathic indignities and assumption of superiority, it has toiled industriously and unceasingly for those attainments which should place it above the reach of calumny ; and we have to thank allopathy to-day for the influence it has thus exerted, which, though not intended, has had much to do in securing for our school its present elevated position. And, happily, they are beginning to see themselves as they are, and as others have seen them for years past. They are actually waking up to the situation, alarmed at their own enfeebled condition and the growing superiority of the reform schools of medicine around them, as is made to appear by the report of the Surgeon General of the State of Ohio, to the Governor, for 1866, which he accompanied with a bill "To elevate the standard of Medical Education." In speaking with regard to the "Military Examining Board," he says :

"Animated by an earnest zeal for the efficiency of the service, they recommended for appointment only those who possessed the requisite qualifications. None but graduates of medical schools were admitted to examinations, and yet, over eighty per cent. of those were rejected for incompetency. The ignorance betrayed by many of the candidates was deporable, proving that the diploma of a medical college has ceased to be of any value as evidence of capacity.

If it was the duty of the state to provide competent physicians for the soldiers, it is not less a duty to make similar provisions for

the citizens; and yet those rejected candidates, with hundreds of others equally incompetent, are now scattered over the state, pursuing their fatal trade with criminal recklessness."

Dr. J. C. Reeve, an allopathic physician, in an article on the subject says: "From this official record there is no appeal; from this evidence furnished by stern experience there is no escape; and the testimony is as damning in character as it is overwhelming in weight. Neither can the deductions from the facts be avoided, and it is plainly made by Dr. McDermott, to whom the profession is indebted for the origin of this bill, and who has recommended in his report the establishment of a Board of Examination for times of peace as well as of war."

To this wail of declining aristocratic medicine, the Eclectic Medical Institute of Cincinnati respond, in asking that if such Board of Examination be established, it be made obligatory upon the Governor to appoint as such Board an equal number of physicians from the Eclectic, homœpathic and allopathic schools, or to establish a separate Board for each school, and in suggesting other amendments to the bill, as follows: "We think it quite likely that the report of the Surgeon General of the State of Ohio is literally true: 'None but graduates of regular medical schools were admitted to examination, and yet over eighty per cent. of these were rejected for incompetency. The ignorance betrayed by many of these candidates was deplorable, proving that the diploma of a medical college has ceased to be of any value as evidence of capacity.'

"They do not urge that our graduates are thus incompetent, and we claim that ninety per cent. could have passed their examining board. As their colleges are are in so much need of reformatory legislation, we would not wish to put anything in their way, but we do claim that the Legislature of this State should protect us in our just rights."

Gentlemen of the Society: In the light of the facts we have laid before you to-day, the reform physician has everything to encourage him on in the good work. His cause is a righteous one. His labors are appreciated and rewarded. Eclecticism is respectable. A word concerning the duties of the hour, and we close. Reference has been made to the expanding and development, slowly, but steadily and surely, of the human mind, from the earlier ages to the present time. Some of the results thus prompting to (and now the reward of) such

development have been enumerated. And judging by the past and present, the grand conceptions of the imagination for the future have been adverted to. The difficulties under which advancement has had to struggle in past ages, and the obloquy and persecution cast upon the leading characters of the world's history, have been seen to be constant concomitant conditions of reform; the exhibitions of cruelty resulting from the enlistment of the baser passions of the earlier times having given away gradually, before the march of civilization and the dawn of enlightenment, to the gentler expressions of aversion and disbelief through sarcasm, ridicule and philosophic criticism of the present day. Medicine, as other sciences, has had its struggles. The times encourage free thought and action, and thus invite to development and progress. A general sifting of facts and theories, the retaining what is good and casting away what is worthless and rotten, has for years been quietly going on under the protection of law, as seen from the rapid sketch of the history of our school we have given. Socially; even yet the path of progress in some places and at some times is not quite smooth, and has to be laid out in the face of a somewhat adverse tide of public sentiment. No obstructions are presented to just and proper reforms at the present day in our own country, however, that need discourage their zealous advocate. The results of a comparison of the value of the practice and the attainments of our school with its allopathic rival have been seen to inure to the advantage of Eclectics.

Let us not, however, permit ourselves to be puffed up, and self-wise, and arrogant from these facts. While we claim high standing for our schools and our system, we are also fully aware that there is much ignorance and incompetency in our own ranks. A high state of general literary culture, as well as high professional attainments, never endanger the reputation of the physician, or injure in the estimation of community their good opinion of his medical sect or school. The absence of such culture and attainments may do both. Let us, then, take a hint from the signs of the times. Let each of us individually weigh ourselves in the balance, deal honestly with ourselves, and see whether or not we will really be found wanting. Let us strive to correct defects where found (and none of us are perfect), as best we may. Let the more unfortunate be not discouraged, for "where there is a will there is a way." It is now conclusively demonstrated that an ignorant man may be more successful as an Eclectic practi-

tioner of medicine than a man of culture may be who practices after the old school system. If this is so, how much higher above him would be the Eclectic peer when cultivated in mind by a liberal general education, and ripe with medical attainments from close study and application, combined with large experience. In the light of such facts, what an incentive to labor! Recently a distinguished Eclectic physician who has made his mark in the world, and who now resides in a neighboring city, told me in conversation that when he began the study of medicine he was quite illiterate. He commenced practice without having attended college, and with but a very limited stock of medical information. "But" said he, "I have been a hard student all my life, and even now, in my advanced years, I never let the twenty-four hours go by without having used three hours out of it in study. If my business will not permit it by day, I *do not sleep* till I have done this amount of study." In this way he has become a gentleman of culture, a ripe medical scholar. This, gentlemen, in our humble opinion, is what we all ought to do. There is no practicing physician but needs it, and it offers the only opportunity, while at the same time *it does offer a most effective one*, of correcting the deficiencies and errors of our early education. Let not the sickly and disgraceful spectacle the allopathic medical fraternity of Ohio have recently exhibited to the world, ever occur through the Eclectic branch of the profession.

Finally, let us put forth renewed effort toward the perfection of our chosen science. Let us labor also to multiply its ranks and spread its influence. We need more physicians to supply the pressing demands of the people, as well as to enlarge our own prestige and influence, and let them be selected for their *natural talents* and *cultivated minds*. Our colleges, and journals and authors, must be supported. Every reform physician should give his support to every reform journal. He needs the reading of the literature they contain to keep up with the progress of the science. They need his support for their moral encouragement, and also to enable them to keep themselves replete with valuable matter. Our authors, too, need the moral and the pecuniary support of our combined ranks. Many of our productions are among the finest known to the science, and even challenge the admiration and praise of other medical schools. Let us invite to such efforts by that most substantial, as well as most complimentary of praise, the buying of their works. With proper zeal and effort on the part of the

wide-awake and thorough going members of the young Eclectic school, its numbers can be doubled and quadrupled in a short space of time, and it will soon reach an influence in advance of the old fossiliferous system of allopathy, that has already outlived its day of usefulness, and in its querulous old age stands tottering on the verge of its tomb.

ARTICLE XLIII.

Animal Heat. An Essay read before the Annual Meeting of the Eclectic Medical Society of the Thirty-second District of the State of New York. By P. SAGE, M. D., Chautauqua County, N. Y.

In selecting a subject for a communication at the annual meeting of this Society, I may have been unwise, for I am aware that it is one of more speculative theories than any other connected with the animal economy. There is, perhaps, no subject connected with physiology that has puzzled theorists more. There is no subject that has had closer investigation with so unsatisfactory results as the one I have selected, and should I fail in establishing the true theory, the present one would be none the less erroneous.

There have been conclusions arrived at that have been satisfactory to some, for a time, but on closer investigation, by other philosophers, their opinions have changed to that of the later investigators; and reasoning from analogy, or from the fact that former theories have given way to those of later investigators, we have reason to believe that we have not yet the correct cause of there being a higher temperature in our bodies than in other matter not connected with mind.

The concentration of an extra amount of heat in the human body is absolutely necessary for the preservation and the maintenance of life, it being a constituent part of the human organism.

Heat is measured by man, that he may apply it to his use and bring its effects nearer to his comprehension.

The measure of heat in the human body is from 98° to 100°. Comparatively this would be cold to that of other substances, while to others absolutely melting hot.

Sufficient variation on the ascending scale from the normal standard established by immutable law, for the existence and maintenance of animal life, would cause dissolution and decomposition.

Nature has ordained that all organic matter shall possess a certain amount of heat, and has appropriated to each form of matter the proper quantity to maintain its present organization.

Sufficient variation from this quantity, as regulated by fixed

law, would be the dissolution of its present form, and from analogous reasoning it is conclusive that the absolute absence of all heat would be the total annihilation of matter.

If this be true, we have to admit that heat is a constituent element of all matter, and that heat exists in every material substance, and that without it matter cannot exist in its present form. We can imagine matter at an extremely low temperature, but of the entire absence of all heat we have no conception.

In geometry we have exceedingly acute angles, but the most acute are blunt points minutely considered. We may describe a circle, but minutely considered it is only circuitous. Philosophers teach us truly, that matter is indestructible, but constantly subject to decomposition or change of form. The impossibility then of annihilating matter proves conclusively that there is a certain quantity of heat in all material substances.

Heat being a constituent element of all organic matter, we are led to the conclusion that the creation or generation of heat is impossible, but that each change of form of substance brings with it, in accordance with immutable law, its appropriate quantity of heat necessary to sustain its new organization. That these changes or reorganizations of matter should take place, is absolutely necessary, or life would be insupportable; this is a law of nature over which we have no control. We may bring in contact substances so different in their organization that decomposition or change of form is the result, and heat being a native element of both is evolved, or set free into the atmosphere, the great receptacle of the heat thus set free.

Heat, as already stated, being a constituent part of all organized matter, would not preclude the idea that it may not all be derived from some one great source; but why different degress of heat exist in different substances must remain for the ingenious to yet determine, as well as the cause of the transformation of matter. That heat exists in all matter, and that the same matter is constantly undergoing changes is an indisputable fact.

Chemists attempt to account for animal matter possessing more heat than any other, by chemical action taking place constantly in all parts of the body, which we will endeavor to prove erroneous before we close.

Sources from whence heat is derived, how generated or how created, has been a subject of debate since 1650. The phlogistic

theory prevailed at that time, and continued until 1784, when Lavoisier demonstrated that there was no such substance as phlogiston or "matter of fire," but he had but one supporter to this theory (Laplace) for eleven years. But his theory at the commencement of the nineteenth century was generally received by scientific men, except Priestly and Cavendish, who never abandoned the phlogistic theory.

The theory of oxydation prevails at the present time as a source of heat. A different source of heat is of late years advocated upon scientific principles by J. Milton Sanders and others, satisfactory to their own minds, that momentum is converted into heat by the retarding or coming to rest of any substance in motion; and, further, that this retarded momentum creates no heat, but evolves that which was at some time derived from the sun, the only source and great fountain of all heat; and that the temperature of the sun, which is 55,000° hotter than it is at the equator of our earth at noonday, is maintained by this same law of momentum being retarded and converted into heat by the impinging of asteroids upon its surface.

Upon this hypothesis the sun is not independent in generating heat, but is dependent upon the movements of other bodies in motion, finally coming to rest upon its own surface. Upon the theory that heat is a constituent element of all matter, as shown above, the whole material universe is supported in its present form by this law of retarded motion upon its surface, and from thence sent off to be distributed to all organic matter of our globe through his rays; but by what law one form of matter receives or appropriates to itself more heat through this channel, is yet to be determined.

Upon this theory we might say that all heat is derived from the sun, chemical action included. Momentum or motion evolves heat only as it meets with opposition, and sufficient opposition to momentum, for its annihilation would cause the greatest possible heat, although in proportion to the magnitude of the body in motion.

Animal matter, dispossessed of mentality, has its due proportion of heat in common with other matter, and the increase of temperature by the union of mind and matter, has given rise to many theories as to the cause of this increase of temperature; and oxydation or chemical action, in its varied forms, has been for a long time the subject of discussion upon this point.

The earlier writers reasoned upon this with no cognizance of the fact that animal matter was possessed with heat in common with other matter without mind, but that all the heat of our systems was manufactured within us by some mysterious process.

Let us examine chemical action. Many theories, by different physiologists, are on record on this subject of animal heat. The earlier writers maintained that the lungs acted as a kind of refrigerator or cooler of the blood. This theory, exploded by the introduction of a more plausible theory, the oxydation or combustion of carbon, as advocated by Lavoisier, and thereby the lungs became a furnace instead of a cooler, by which the whole body was warmed through the medium of the circulation.

This theory, in turn, exploded, in the main, by the introduction of Liebig's theory, who maintained that the carbonic acid was not formed in the lungs, but existed in the blood latently before its arrival to the lungs, and that the oxygen, combined with the carbon, in the lungs, and in solution was carried by the circulation to all parts of the body; consequently the oxydation or combustion of the blood took place in all the tissues of the body. But to maintain a perpetual heat, it was necessary that there be some source of supply to the constant consumption of the fuel in the blood, or the fire would go out and the body die.

The food we eat, to meet this constant demand, seemed to be the only alternative, which he classifies:

First. The nitrogenous, which are to be introduced in small quantities and converted into albumen and muscle.

Second. Hydro-carbons, sugar, starch and fat; these are to be taken immediately into the circulation to be burned and expelled.

This theory was very plausible, provided the supply was equal to the demand, and a proper regulator to the combustive process to prevent disaster in case combustion was too rapid.

Liebig's theory has had its advocates in the profession, but gave way to the theory of Lehman, of Germany, and Verdiel, of France.

The combustive process is discarded entirely by some and a theory instituted that heat is generated in all parts of the body simultaneously, by many processes, and that all are dependent on different chemical changes in each one.

This is the theory of Prof. J. C. Dalton, of New York, a man of high reputation as a scholar and physiologist, but not without error on this subject. His doctrine of the simultaneous activity

of many processes taking place in many different organs, and dependent on different chemical changes in each one, is no more satisfactory to the reader than that of Liebig, Lehman, Verdiel, Robin or Lavoisier. He says we know that in the interior of the body a thousand different actions are going on, sufficient to account for the production of animal heat.

This great number of chemical actions going on in the interior must be supplied with the necessary elements for contact from some source, and in the appropriate quantity, or there would be a corresponding variation of temperature; but we only observe a variation of about two degrees.

Heat is evolved by chemical action by the contact of caustic potassa and water, or sulphuric acid and water; but how quickly will it pass away unless the contact of elements is kept up.

So long, then, as these elements for chemical action must enter the system by the stomach or lungs, we have great reason to believe that this theory is not the true one, the supply for the demand being too unequal to maintain so uniform a temperature as we find in the body.

Should it be argued that one or more of these elements are laid in store in the system until needed, the same objection prevails; for the supply must necessarily fail in part, if no more, sooner or later, unless replenished from without; for the most cadaverous looking individual sinks no lower in temperature, internally, than he who is in health.

That chemical action (if carried on in the system at all) evolves heat we do not deny, but the reverse is also a consequence; for upon no other hypothesis can we account for the slight variations of temperature found in different organs and parts of the same organ as determined by Bernard's experiments.

We find by his experiments, that some organs are exhausting the vital heat of the blood, while the same fluid in its travel from one to other organs of the viscera, rises in temperature.

Who can account for the heating and cooling process of the blood by the theory of chemical action? Why should the blood in the left side of the heart be one-third of a degree lower than upon the right side?

Why is the blood in the abdominal viscera made hotter in its travel to that region?

Why is the blood of a higher temperature in the hepatic vein, than in any other part of the system?

What chemical change takes place in that organ, so as to raise the temperature higher than in any other organ?

What is the chemical action that supports animal heat in those cases of supposed death where the body lays for days without signs of life except the heat of the body?

In those cases we can see no process of chemical action going on while circulation and respiration are suspended.

In cases of this kind it is evident that if the mind had left the body it would have cooled like any other heated substance; and the eventual resuscitation of the body is positive proof that the mind had not yet departed. With these facts before us we conclude:

1st. That chemical action or oxydation is not the only source of heat.

2d. That from the fact that the mind remained with the body, and heat was still maintained, while all other sources were suspended, we have very good evidence that the mind, in some undiscovered manner, retains or generates heat.

Again, if chemical action is the cause of heat in our bodies, it could proceed and evolve heat throughout the system with the external atmospheric temperature at an extremely low degree, as well as if it was at a high degree.

For example: the mixing of sulphuric acid and water in an atmosphere at an extremely low temperature, will not prevent heat being evolved.

But we find man freezing at his extremities with all the asserted chemical action going on in an external temperature at the same degree that the acid and water was while violently evolving heat.

If the production of heat is due to chemical action in all the tissues of the body, according to Prof. Dalton's theory, the extremities could not congeal only at the same time the whole body did, for the blood being the only vehicle that can convey the elements for chemical action to all parts of the system, we readily see that this process of generating heat is supplied with the necessary elements for the production of heat as sufficiently at the extremities as at any other part of the system.

From the above illustrations, then, we are forced to discard the theory that chemical action is the cause of the heat of our bodies, unless the thousand chemical actions hinted at by Dalton, are of such a nature that external temperature will freeze them to inactivity.

I have already referred to cases of suspended animation, where pulsation and respiration were suspended, but heat still remained for days in the body, while the suspended functions finally resuscitated, as a proof against the present theory of generating heat.

There are other important inquiries, or suggestions at least, connected with these cases which seem to be intimately connected with my subject.

The fact that the mind and heat remained in the body for days, while all other functions were suspended, indicates, at least, that they were inseparably connected.

That the mind generates heat by some process peculiar to itself, or that the mind persistently remains with the body so long as heat is evolved by any process.

It is evident that if heat had been suspended with all the other functions, decomposition would have commenced immediately, and the mind would have taken its exit. Or had the mind taken its exit, heat would have been suspended.

We know the mind has an independent existence, and if it cannot exist in the body it will leave it.

The union of mind and matter is yet shrouded in mystery, although heat seems to be the connecting link between mind and the material body.

We know, too, that the mind has an independent power for its own gratification. As an example, it has an independent power over gravitation.

It manifests this power in the movements of the body.

It has a general supervising power over all the actions or movements of the body through the nervous system.

This is very mysterious, yet true.

The mind dwells in a nervous mass, from whence long lines lead off to the farthest extremities of the body, so that in case of invasion of the more distant parts by some foreign power, it will be immediately telegraphed through those lines to the mind, that there is danger, and the mind will put the body in motion or attitude of self-defence.

Some organs seem to have an independent or involuntary action or motion, but this is impossible. They are dependent upon the action of other organs which are acted upon by the mind.

Many are the mysteries of the union of the mind and the body. The perfect obeyance of the physical to the mental man is one of the strongest proofs of the independent existence of the mind.

The generation or evolvement of heat, as in suspended animation, by the unconscious action of the mind on the nerves, would be no more mysterious than the unconscious action of the mind upon other organs, for a specific purpose. The fact that external temperature overcomes the heat generating power of our bodies, is proof that chemical action will proceed as easily in a low temperature as in a high one; but this fact would be no proof against the mind acting on the nerves, as the generating power, for we see the powers of the mind may be overcome in all its strength in every effort by external circumstances. The mind only guards and protects the body until overpowered by superior force; then yields it up and takes its flight.

From the experiments of Bernard we learn that the nerves have much to do in the distribution of heat, if not in its generation. He discovered that the division of the sympathetic nerve about the neck was marked by an increase of temperature of the head upon that side.

This experiment proves that the transmission of heat was from above downward, and that it must have been generated or evolved in the brain, and was being sent forward to more distant parts, or it would not have increased the temperature above by the channel of transmission being cut off below.

The severing of this nerve could not change the chemical action going on in the tissues through the medium of the blood, for that fluid is not prevented nor retarded in its course by this experiment.

If the heat was not generated above, in the brain, the division of the nerve might have increased the temperature below the division as well as above it.

This seems to be proof that the evolvement of heat is the mind acting mysteriously upon the nerve matter of the brain, and sent off through the lines of nerves leading from the brain.

In local inflammation, the increase of temperature cannot be in the blood, for increasing the quantity of blood at a given temperature at any one point of obstruction, would not increase the temperature at that point.

A determination of blood to any one point cannot increase the temperature at the point of determination.

The increase of temperature and accompanying pain is due to an obstruction of the channel, of transmission of heat, as in the case of the severed nerve by Bernard.

Chemical action could not bring about this local change of temperature.

If we freeze a foot, the blood and all the unfrozen parts of the body remain at from 98° to 100°.

The blood will circulate to and from the frozen parts at the same temperature it did before congelation.

The nervous system is not circulatory; consequently, upon the theory that heat is transmitted from the brain, external temperature may freeze the extremities of the nerves, and the degrees of coldness extend back toward the nerve centres and brain, the place of generation, until the power of the mind upon the nerves is overcome, and it yields the body up and departs.

It is upon this theory that the man with the strongest will can resist the effects of cold longer than one with less of the volition.

Why rouse the man from the freezing coma? For the purpose of increasing chemical action? No, for he has no mental control over that process; but for the purpose of renewed and prolonged action of the mind upon the nervous system, and thereby to maintain animal heat longer and prevent dissolution. Numerous instances of this kind are on record, where the stronger volition has roused the weaker mind of his fellow from the freezing sleep, and thus saved him from death.

In these cases the temperature stood at 98° or 100°, and chemical action was alike active in both, but the stronger volition saved both from death.

The time of meeting of this society having been changed from June to May, without my knowledge, has prevented me from presenting to you my views upon the real cause of animal matter possessing more heat than it would have possessed were it not connected with mind; but should I be favored with the pages of some one of our medical journals, I will give its readers my theory, which may be novel, on this subject.

ARTICLE XLIV.

Officers of the Eclectic Medical Society of the State of New York, 1867–8.

President.

Wm. W. Hadley, M. D., 111 Fifth street, Brooklyn, E. D.

Vice-President.

L. Stanton, M. D., Copenhagen, Lewis county.

Recording Secretary.

Paul W. Allen, M. D., 111 East Eighty-second street, New York.

Corresponding Secretary.

M. M. Fenner, M. D., Jamestown.

Treasurer.

D. E. Smith, M. D., 165 Fort Greene place, Brooklyn.

Censors.

E. Freeman, M. D., cor. Greene and Amity sts., New York.
A. W. Russell, M. D., Albany.
W. Jones, M. D., Newburgh.
R. S. Newton, M. D., 29 East Nineteenth street, New York.
C. S. Totman, M. D., Syracuse.

ARTICLE XLV.

Officers of Auxiliary Medical Societies, 1867.

Brooklyn Academy of Eclectic Medicine, comprising the Second and Third Senate Districts.

President—H. S. Firth, M. D.
Vice-President—John Horton, M. D.
Secretary—H. E. Firth, M. D.
Treasurer—Benj. J. Stow, M. D.

Eclectic Medical Society of the City of New York, comprising the Fourth, Fifth, Sixth, and Seventh Senate Districts.

President—E. Whitney, M. D.
Vice-President—J. Comins, M. D.
Treasurer—O. S. Gregory, M. D.
Secretary—Paul W. Allen, M. D.

Eclectic Medical Society of the Twelfth Senate District.

President—Josiah A. Martin, M. D.
Vice-President—A. R. Edson, M. D.
Rec. Secretary—H. E. Finkle, M. D.
Cor. Secretary—C. K. Brown, M. D.
Treasurer—D. A. Chase, M. D.

Eclectic Medical Society of the Eighteenth Senate District.

President—L. Stanton, M. D.
Vice-President—J. H. Cooper, M. D.
Secretary—J. W. Sargent, M. D.
Treasurer—A. P. Hale, M. D.
Cor. Secretary—J. H. Cooper, M. D.
Censors—Drs. L. Stanton, J. H. Cooper, A. P. Hale.

Eclectic Medical Society of the Twenty-third Senate District.

President—T. L. Harris, M. D.
Vice-President—J. J. Westcott, M. D.
Rec. Secretary—E. E. Salisbury, M. D.
Treasurer—G. E. Lawrence, M. D.
Cor. Secretary—H. C. Gazlay, M. D.

Eclectic Medical Society of the Twenty-sixth Senate District.

President—I. Wilson, M. D.
Vice-President—W. W. Wheaton, M. D.
Secretary—P. A. Johnson, M. D.
Cor. Secretary—F. D. Gridley, M. D.
Treasurer—J. French, M. D.

Eclectic Medical Society of the Twenty-ninth Senate District.

President—R. Thomas, M. D.
Vice-President—R. Andrews, M. D.
Secretary—E. C. Abbey, M. D.
Treasurer—A. C. Keith, M. D.
Censors—Drs. E. C. Abbey, O. F. Thomas, J. G. Dolley.

Eclectic Medical Society of the Thirty-second Senate District.

President—C. C. Rugg, M. D.
Vice-President—M. M. Fenner, M. D.
Secretary—N. F. Marsh, M. D.
Treasurer—A. S. Davis, M. D.
Censors—Drs. H. C. Taylor, A. P. Parsons, James Fenner.

ARTICLE XLVI.

Names of Members of the Eclectic Medical Society of the State of New York, January 16, 1868, with their residence and date of admission.

October 13, 1863.

Wm. Jones, M. D.	Newburgh, N. Y.
H. S. Firth, M. D.	Williamsburgh.
B. J. Stow, M. D.	Brooklyn.
D. E. Smith, M. D.	do
James T. Burdick, M. D.	do
Wm. W. Hadley, M. D.	Williamsburgh.
Robert S. Newton, M D	New York.
Jacob Van Valkenburgh, M. D.	Charleston Four Corners.
L. Stanton, M. D.	Copenhagen.
E. J. Mattocks, M. D.	Chicago.
R. H. Owen, M. D.	Haverstraw.
R. Hamilton, M. D	Saratoga Springs.
C. T. Greenleaf, M. D.	Brewerton.
H. Ransom Gray, M. D.	Hudson.
Harmon Pease, M. D.	Schenectady.
Jonah A. Martin, M. D.	Troy.
A. W. Russell, M. D.	Albany.
H. E. Firth, M. D.	Brooklyn.

January 13, 1864.

Amos Stoddard, M. D.	Naples.
Lewis C. Silvernail, M. D.	Harpersfield.
Noah S. Dean, M. D.	Albany.
Thomas L. Harris, M. D.	Cazenovia.
Wm. D. Thayer, M. D.	Fabius.
A. B. Westcott, M. D.	Little Falls.
Elisha S. Preston, M. D.	Rochester.
G. W. Taylor, M. D.	Schenectady.
John B. Wheeler, M. D.	West Fulton.
J. S. Holland, M. D.	Sandy Hill.
Chas. K. Brown, M. D.	Troy.

June 8, 1864.

B. F. Arnold, M. D	Pawlings.
Thos. R. Frazer, M. D	Halifax, N. S.
Samuel Tuthill, M. D	Poughkeepsie.
H. M. Sweet, M. D	New York.
Geo. Newby, M. D	do
Robt. L. Hamilton, M. D	Brooklyn.
James Wilson, M. D	Owego.
P. A. Johnson, M. D	Waverly.
R. B. Griswold, M. D	Banksville.
C. W. Bates, M. D	Hempstead.
Henry Hallembaek, M. D	Burlington, N. J.
Joseph Sites, M. D	Philadelphia, Pa.
Wm. Clark, M. D	do
Wm. F. Smith, M. D	do
John Buchanan, M. D	do
Orin Davis, M. D	Attica, N. Y.

January 18, 1865.

P. S. Stearns, M. D	Owego.
J. M. Harding, M. D	Apalachia.
Thos. Robens, M. D	Quaker Springs.
Chas. Brown, M. D	East Avon.
J. J. Sharp, M. D	Tuscarora.
Geo. H. Preston, M. D	Dansville.
C. S. Totman, M. D	Syracuse.
R. P. Crandall, M. D	Greene.
J. G. Fross, M. D	Syracuse.
Jesse Watson, M. D	Fulton.
Frank D. Gridley, M. D	Whitney's Point.

June 14, 1865.

G. V. Armington, M. D	Farmington.
H. S. Dimock, M. D	Phelps.
Wm. H. Hawley, M. D	Potter Center.
F. C. Hawley, M. D	Middlesex.
J. A. Hawley, M. D	Canandaigua.
D. Richards, M. D	Marion.
L. A. Ward, M. D	Hornellsville.
Henry Esten, M. D	
Jona Howard, M. D	Linden.

Joel C. Hulbert, M. D	Livonia.
Seth Easton, M. D	Ontario.
Rowell Thomas, M. D	Rockport.
M. M. Fenner, M. D	Jamestown.
C. L. Harding, M. D	Nunda.
B. P. Backus, M. D	Murillo, India.
James Pennoyer, M. D	Brooklyn.

June 13, 1866.

Herman Boskowitz, M. D	Brooklyn.
A. P. Parsons, M. D	Forrestville.
L. H. Bone, M. D	New York.
Daniel A. Chase, M. D	Cambridge.
James C. Humphrey, M. D	Little Falls.
Walter D. Jones, M. D	Newburgh.
Alvin R. Edson, M. D	Greenwich.
H. C. Taylor, M. D	Brocton.
D. Wilcocks, M. D	Brooklyn.
H. C. Gazlay, M. D	Cortland.
G. E. Lawrence, M. D	Smyrna.
M. Hermance, M. D	Brooklyn.
E. H. Sands, M. D	Brooklyn, E. D.
Luman B. Hoag, M. D	Brewsters.
Thos. D. Worrall, M. D	Savannah, Ga.
Edwin Freeman, M. D	New York.
A. B. Whitney, M. D	do

June 12, 1867.

Wm. R. Hayden, M. D	New York.
George L. Whitcomb, M. D	Fredonia.
James N. Betts, M. D	Pulaski.
George W. King, M. D	Saratoga Springs.
J. Y. Tuthill, M. D	Brooklyn.
John A. Rega, M. D	Belleville.
Chas. T. Hart, M. D	New York.
Orrin Ford, M. D	Saratoga Springs.
Paul W. Allen, M. D	New York.

January 15, 1868.

John Horton, M. D	Brooklyn.
O. L. Southworth, M. D	Leonardsville.
James J. Westcott, M. D	Norwich.

J. M. Comins, M. D..... New York.
Edward F. Garvin, M. D..... do
Henry C. Cooper, M. D..... Brooklyn.
J. A. Salisbury, M. D..... Corry, Pa.

Honorary and Corresponding Members.

June 8, 1864.

Wm. Byrd Powell, M. D., LL. D..... Kentucky.
Walter Burnham, M. D..... Massachusetts.
John M. Scudder, M. D..... Ohio.

June 14, 1865.

O. E. Newton, M. D..... Ohio.

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Paul W. Allen, M. D., 111 East Eighty-second street, New York.

Corresponding Secretary.

M. M. Fenner, M. D., Jamestown.

Treasurer.

D. E. Smith, M. D., 165 Fort Greene place, Brooklyn.

Censors.

E. Freeman, M. D., cor. Greene and Amity sts., New York.
A. W. Russell, M. D., Albany.
W. Jones, M. D., Newburgh.
R. S. Newton, M. D., 29 East Nineteenth street, New York.
C. S. Totman, M. D., Syracuse.

Chemical action could not bring about this local change of temperature.

If we freeze a foot, the blood and all the unfrozen parts of the body remain at from 98° to 100°.

The blood will circulate to and from the frozen parts at the same temperature it did before congelation.

The nervous system is not circulatory; consequently, upon the theory that heat is transmitted from the brain, external temperature may freeze the extremities of the nerves, and the degrees of coldness extend back toward the nerve centres and brain, the place of generation, until the power of the mind upon the nerves is overcome, and it yields the body up and departs.

It is upon this theory that the man with the strongest will can resist the effects of cold longer than one with less of the volition.

Why rouse the man from the freezing coma? For the purpose of increasing chemical action? No, for he has no mental control over that process; but for the purpose of renewed and prolonged action of the mind upon the nervous system, and thereby to maintain animal heat longer and prevent dissolution. Numerous instances of this kind are on record, where the stronger volition has roused the weaker mind of his fellow from the freezing sleep, and thus saved him from death.

In these cases the temperature stood at 98° or 100°, and chemical action was alike active in both, but the stronger volition saved both from death.

The time of meeting of this society having been changed from June to May, without my knowledge, has prevented me from presenting to you my views upon the real cause of animal matter possessing more heat than it would have possessed were it not connected with mind; but should I be favored with the pages of some one of our medical journals, I will give its readers my theory, which may be novel, on this subject.

ARTICLE XLIV.

Officers of the Eclectic Medical Society of the State of New York, 1867–8.

President.

Wm. W. Hadley, M. D., 111 Fifth street, Brooklyn, E. D.

Vice-President.

L. Stanton, M. D., Copenhagen, Lewis county.

Recording Secretary.

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